2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2005
Secretary of State

DOCUMENT# P01000101804

Entity Name: OREASOC GROUP, INC.

Current Principal Place of Business:

15841 PINES BLVD
315
PEMBROKE PINES, FL 33027

New Principal Place of Business:

4474 WESTON ROAD
SUITE 176
WESTON, FL 33332

Current Mailing Address:

15841 PINES BLVD
315
PEMBROKE PINES, FL 33027

New Mailing Address:

4474 WESTON ROAD
SUITE 176
WESTON, FL 33332

FEI Number: 65-1145608 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

OREA, HECTOR J
15841 PINES BLVD SUITE 315
PEMBROKE PINES, FL 33027 US

Name and Address of New Registered Agent:

OREA, HECTOR J
4474 WESTON ROAD
SUITE 176
WESTON, FL 33332 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: HO 01/12/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: OREA, HECTOR
Address: 15841 PINES BLVD SUITE 315
City-St-Zip: PEMBROKE PINES, FL 33027

Title: VD ( ) Delete
Name: NAVAS, STELLA
Address: 15841 PINES BLVD # 315
City-St-Zip: PEMBROKE PINES, FL 33027

Title: S (X) Delete
Name: OREA, HECTOR J
Address: 15841 PINES BLVD # 315
City-St-Zip: PEMBROKE PINES, FL 33027

Title: LD (X) Delete
Name: OREA, INGRID J
Address: 15841 PINES BLVD #315
City-St-Zip: PEMBROKE PINES, FL 33027

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: OREA, HECTOR
Address: 4474 WESTON ROAD, SUITE 176
City-St-Zip: WESTON, FL 33332

Title: VD (X) Change ( ) Addition
Name: OREA, HECTOR J
Address: 4474 WESTON ROAD, SUITE 176
City-St-Zip: WESTON, FL 33332

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HECTOR OREA P 01/12/2005
Electronic Signature of Signing Officer or Director Date