

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000025904

FILED
Mar 28, 2005
Secretary of State

Entity Name: OCEANIQUE DEVELOPMENT COMPANY, INC.

Current Principal Place of Business:

925 NORTH COURTNEY PARKWAY
MERRITT ISLAND, FL 32953

New Principal Place of Business:

Current Mailing Address:

925 NORTH COURTNEY PARKWAY
MERRITT ISLAND, FL 32953

New Mailing Address:

FEI Number: 56-2296807

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NOHRR, PHILIP F
1800 WEST HIBISCUS BLVD., SUITE 138
MELBOURNE, FL 32902 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KODSI, MAURICE
Address: POST OFFICE BOX 320637
City-St-Zip: COCOA BEACH, FL 329320637

Title: VPSD () Delete
Name: KODSI, ROBERT
Address: POST OFFICE BOX 320637
City-St-Zip: COCOA BEACH, FL 329320637

Title: VP () Delete
Name: KODSI, MICHAEL
Address: POST OFFICE BOX 320637
City-St-Zip: COCOA BEACH, FL 329320637

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: MAURICE KODSI

PD

03/28/2005

Electronic Signature of Signing Officer or Director

Date