2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 04, 2008 08:00 AN Secretary of State **DOCUMENT # P02000049793** 1. Entity Name O.E. ONLY BUMPERS INC. Principal Place of Business Mailing Address **515 E 9TH STREET** 515 E 9TH STREET JACKSONVILLE, FL 32206 JACKSONVILLE, FL 32206 CR2E034 (11/05) 03272008 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 02-0597737 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE SOARES, JOHN J 515 E 9TH STREET JACKSONVILLE, FL 32206 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS *** U00000880207**** 04/15/08+80051+015-150:00 10. TITLE D SOARES, JOHN J NAME STREET ADDRESS 515 E 9TH STREET CITY-ST-7IP JACKSONVILLE, FL 32206 TITLE NAME DESANTIS, VINCENT A 515 E 9TH STREET STREET ADDRESS CITY-ST-ZIP JACKSONVILLE, FL 32206 DO NOT WRITE STREET ADDRESS CITY-ST-7IP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TTLE NAME

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

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STREET ADDRESS CITY-ST-ZIP

V/P

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