

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000017335

Entity Name: OCEAN VERO, INC.

FILED  
May 02, 2005  
Secretary of State

## Current Principal Place of Business:

13180 N CLEVELAND AVE  
SUITE 112  
N FORT MYERS, FL 33903

## New Principal Place of Business:

## Current Mailing Address:

13180 N CLEVELAND AVE  
SUITE 112  
N FORT MYERS, FL 33903

## New Mailing Address:

FEI Number: 56-2347121

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ALEXIS, PARKER  
13180 N. CLEVELAND AVENUE  
139  
NORTH FORT MYERS, FL 33903 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( )

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: MICHAEL, HYDE  
Address: 7850 REFLECTION COVE DRIVE, #306  
City-St-Zip: FORT MYERS, FL 33907

Title: P ( ) Delete  
Name: UTTLEY, THOMAS DR  
Address: 5260 S. LANDINGS DR; PH 1704  
City-St-Zip: FORT MYERS, FL 33919

Title: VP ( ) Delete  
Name: HYDE, MICHAEL  
Address: 7850 REFLECTION COVE DRIVE, #306  
City-St-Zip: FORT MYERS, FL 33907

Title: ST ( ) Delete  
Name: SMITH, JUDI  
Address: 5260 S. LANDINGS DR; PH 1704  
City-St-Zip: FORT MYERS, FL 33919

## 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:

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: MICHAEL HYDE

VP

05/02/2005

Electronic Signature of Signing Officer or Director

Date