

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000017335

Entity Name: OCEAN VERO, INC.

FILED
May 03, 2007
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: P (X) Change () Addition
Name: UTTLEY, THOMAS DR
Address: 1002 CLARELLEN
City-St-Zip: FORT MYERS, FL 33919

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

Title: ST (X) Change () Addition
Name: UTTLEY, JUDI
Address: 1002 CLARELLEN
City-St-Zip: FORT MYERS, FL 33919

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: CHRISTY SENDRA

ADM

05/03/2007

Electronic Signature of Signing Officer or Director

Date