


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 07, 2006 8:00 am**  
**Secretary of State**

03-07-2006 90005 028 \*\*\*150.00

<b>DOCUMENT # P03000088386</b> 1. Entity Name <b>OCEANAIRE MARKETING GROUP, INC.</b>																																																																																																																																			
Principal Place of Business <b>10850 HILLTOP DRIVE NEW PORT RICHEY, FL 34654</b>			Mailing Address <b>10850 HILLTOP DRIVE NEW PORT RICHEY, FL 34654</b>																																																																																																																																
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.																																																																																																																																
City & State			City & State																																																																																																																																
Zip	Country	Zip	Country	4. FEI Number <b>NOT APPLICABLE</b>																																																																																																																															
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable																																																																																																																															
6. Name and Address of Current Registered Agent  <b>DALY, PAMELA 10850 HILLTOP DRIVE NEW PORT RICHEY, FL 34654</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City																																																																																																																															
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.				FL Zip Code																																																																																																																															
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)																																																																																																																																			
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees																																																																																																																																
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3" style="padding: 5px;">10. OFFICERS AND DIRECTORS</th> <th colspan="3" style="padding: 5px;">11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</th> </tr> <tr> <td style="width:15%; padding: 5px;">TITLE</td> <td style="width:55%; padding: 5px;"> <b>P DALY, PAMELA</b> <input type="checkbox"/> Delete  <b>10850 HILLTOP DRIVE</b>  <b>NEW PORT RICHEY, FL 34654</b> </td> <td style="width:30%; padding: 5px;"></td> <td style="width:15%; padding: 5px;">TITLE</td> <td style="width:55%; padding: 5px;"></td> <td style="width:30%; padding: 5px;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td style="padding: 5px;">NAME</td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;">NAME</td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> </tr> <tr> <td style="padding: 5px;">STREET ADDRESS</td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;">STREET ADDRESS</td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> </tr> <tr> <td style="padding: 5px;">CITY - 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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.																																																																																																																																			
<b>SIGNATURE:</b> <u>P. Daly</u> <span style="float: right;">3/6/06 727-8630804</span> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>																																																																																																																																			