2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000102917

Entity Name: ONE STOP ADVERTISING, INC.

FILED Apr 30, 2005 Secretary of State

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
P.O. BOX : NAVARRE	5086 E, FL 32566	US			
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
P.O. BOX : NAVARRE	5086 E, FL 32566	US			
FEI Number:	20-0234669	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name and Address	of New Registered Agent:	
773 4TH A SUITE E NAPLES, I The above	VENUE NOR FL 34102 US	;	urpose of changing its registe	red office or registered agent, or both,	
SIGNATUF					
	Electro	nic Signature of Registered Age	nt	Date	
Election Car	npaign Financir	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P (GREEN, JAME P.O. BOX 508 NAVARRE, FL	6	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP (GREEN, MYR/ P.O. BOX 508 NAVARRE, FL	6	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CEO (GREEN, JAME P.O. BOX 508 NAVARRE, FL	6	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CFO (GREEN, JAME P.O. BOX 508 NAVARRE, FL	6	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	COO (GREEN, MYRA P.O. BOX 508 NAVARRE, FL	6	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: JAMES L GREEN P 04/30/2005