

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000104043

FILED
Apr 15, 2005
Secretary of State

Entity Name: ORTHO-JEL INDUSTRIES, INC.

Current Principal Place of Business:

634 S.W. 177TH AVENUE
PEMBROKE PINES, FL 33029

New Principal Place of Business:

15966 SW 5TH ST
PEMBROKE PINES, FL 33027

Current Mailing Address:

634 S.W. 177TH AVENUE
PEMBROKE PINES, FL 33029

New Mailing Address:

15966 SW 5TH ST
PEMBROKE PINES, FL 33027

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIANO, LUIS FERNANDO
634 S.W. 177TH AVENUE
PEMBROKE PINES, FL 33029 US

Name and Address of New Registered Agent:

RIANO, LUIS FERNANDO
15966 SW 5TH ST
PEMBROKE PINES, FL 33027 US

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:

04/15/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: MR () Delete
Name: RIANO, LUIS FERNANDO
Address: 634 S.W. 177TH AVENUE
City-St-Zip: PEMBROKE PINES, FL 33029

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR (X) Change () Addition
Name: RIANO, LUIS FERNANDO
Address: 15966 SW 5TH ST
City-St-Zip: PEMBROKE PINES, FL 33027

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: LUIS F. RIANO

MR

04/15/2005

Electronic Signature of Signing Officer or Director

Date