

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000111906

Entity Name: OCEANMND INC.

FILED
Aug 24, 2005
Secretary of State

Current Principal Place of Business:

392 FLAGLER AVE
NEW SMYRNA BEACH, FL 32169 US

New Principal Place of Business:

392 FLAGLER AVE
NEW SMYRNA BEACH, FL 32168 US

Current Mailing Address:

708 SHEPARD CT.
WINTER SPRINGS, FL 32708 US

New Mailing Address:

4112 TREADWAY RD.
NEW SMYRNA BEACH, FL 32168 US

FEI Number: 20-1040315

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OLIVA, DAWN
708 SHEPARD CT
WINTER SPRINGS, FL 32708 US

Name and Address of New Registered Agent:

OLIVA, DAWN
4112 TREADWAY RD
NEW SMYRNA BEACH, FL 32168 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: _____

08/24/2005

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: P () Delete
Name: OLIVA, DAWN
Address: 708 SHEPARD CT
City-St-Zip: WINTER SPRINGS, FL 32708 US

Title: S (X) Delete
Name: GLENN, LARRY
Address: 392 FLAGLER AVE.
City-St-Zip: NEW SMYRNA BEACH, FL 32169

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: OLIVA, DAWN
Address: 4112 TREADWAY RD
City-St-Zip: NEW SMYRNA BEACH, FL 32168 US

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: DAWN OLIVA

PRES

08/24/2005

Electronic Signature of Signing Officer or Director

Date