2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000122306

Entity Name: OCEAN VIEW DIGITAL PRINTING, INC.

FILED Apr 27, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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9446 PHILLIPS HWY STE 5-1 9446 PHILIPS HIGHWAY JACKSONVILLE, FL 32256 SUITE 5A

JACKSONVILLE, FL 32256

Current Mailing Address: New Mailing Address:

9446 PHILLIPS HWY STE 5-1 9446 PHILIPS HIGHWAY JACKSONVILLE, FL 32256

SUITE 5A

JACKSONVILLE, FL 32256

FEI Number: 11-3706750 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:

ESHNAUR, VINCENT W ESHNAUR, VINCENT W 9446 PHILLIPS HWY STE 5-1 9446 PHILIPS HIGHWAY JACKSONVILLE, FL 32256 US SUITE 5A

JACKSONVILLE, FL 32256 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: VINCENT W. ESHNAUR 04/27/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

ESHNAUR, VINCENT W ESHNAUR, VINCENT W Name: Name:

9446 PHILLIPS HWY STE 5-1 9446 PHILIPS HIGHWAY, SUITE 5A Address: Address: City-St-Zip: JACKSONVILLE, FL 32256 City-St-Zip: JACKSONVILLE, FL 32256

Title: Title: (X) Change () Addition () Delete

Name: HIGGINS, JOSEPH E III Name: HIGGINS, JOSEPH E III

9446 PHILLIPS HWY STE 5-1 9446 PHILIPS HIGHWAY, SUITE 5A Address: Address: JACKSONVILLE, FL 32256 JACKSONVILLE, FL 32256 City-St-Zip: City-St-Zip:

Title: () Change (X) Addition Title: () Delete Name: HIGGINS, JOSEPH E Name: 1310 LAKE VIKING TERRACE Address: Address: City-St-Zip: City-St-Zip: GALLATIN, MO 64640

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: VINCENT W. ESHNAUR 0 04/27/2005