2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2005
Secretary of State

DOCUMENT# P03000148920

Entity Name: ONE WAY ALL CONTRACTORS CORP.

Current Principal Place of Business:

200 MASSACHUSETTS WOODS LANE
ORLANDO, FL 32824 US

New Principal Place of Business:

200 MASSAHUSETTS WOODS LANE
ORLANDO, FL 32824 US

Current Mailing Address:

200 MASSACHUSETTS WOODS LANE
ORLANDO, FL 32824 US

New Mailing Address:

FEI Number: 20-0471448 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LARSON, CAROLINE
1510 E COLONIAL DR
307
ORLANDO, FL 32803 US

Name and Address of New Registered Agent:

LARSON, CAROLINE
5950 LAKEHURST DR
246
ORLANDO, FL 32819 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: CAROLINE LARSON 01/11/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: OLIVEIRA, JOAO A JR
Address: 200 MASSACHUSETTS WOODS LANE
City-St-Zip: ORLANDO, FL 32824 US

Title: DVP ( ) Delete
Name: OLIVEIRA, GLADYS R
Address: 200 MASSACHUSETTS WOODS LANE
City-St-Zip: ORLANDO, FL 32824 US

Title: DS ( ) Delete
Name: LIMA, EUNICE
Address: 14201 COLONIAL GRAND BLVD. APT 2007
City-St-Zip: ORLANDO, FL 32837 US

Title: DT ( ) Delete
Name: PRADO, ANA PAULA
Address: 200 MASSACHUSETTS WOODS LANE
City-St-Zip: ORLANDO, FL 32824 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: DVP (X) Change ( ) Addition
Name: REIS, ROGERIO F
Address: 200 MASSACHUSETTS WOODS LANE
City-St-Zip: ORLANDO, FL 32824 US

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: JOAO A OLIVEIRA JR DP 01/11/2005
Electronic Signature of Signing Officer or Director Date