2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000066579

Entity Name: OPTIMA ENTERPRISES, INC.

FILED Mar 15, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4721 3RD AVE. NORTH 2739 US HWY 19

ST. PETERSBURG, FL 417

HOLIDAY, FL 34691

Current Mailing Address: New Mailing Address:

4721 3RD AVE. NORTH 2739 US HWY 19 ST. PETERSBURG, FL

417

HOLIDAY, FL 34691

FEI Number: 56-2456956 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:

KALAL, TIMOTHY G DAVIDSON, SUSAN W 4721 3RD AVE. NORTH 2739 US HWY 19

ST. PETERSBURG, FL US HOLIDAY, FL 34691 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: SUSAN W. DAVIDSON 03/15/2005

> 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

KALAL, TIMOTHY G KALAL, TIMOTHY G Name: Name:

P. O. BOX 27384 2859 PARK STREET NORTH, #258 Address: Address: City-St-Zip: TAMPA, FL 33623 City-St-Zip: ST. PETERSBURG, FL 33709

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 Statutés. 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: TIMOTHY G. KALAL 03/15/2005 D