

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000092643

Entity Name: ONLINE DIGITAL MARKETS INC.

FILED  
May 27, 2005  
Secretary of State

## Current Principal Place of Business:

2090 ARDENCROFT DR  
JACKSONVILLE, FL 32246

## New Principal Place of Business:

2090 ARDENCROFT DR  
JACKSONVILLE, FL 322461388 US

## Current Mailing Address:

2090 ARDENCROFT DR  
JACKSONVILLE, FL 32246

## New Mailing Address:

2090 ARDENCROFT DR  
JACKSONVILLE, FL 322461388 US

FEI Number: 20-1189019

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MARTINEZ, RAUL A  
2090 ARDENCROFT DR  
JACKSONVILLE, FL 32246 US

## Name and Address of New Registered Agent:

MARTINEZ, RAUL A  
2090 ARDENCROFT DR  
JACKSONVILLE, FL 322461388 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: RAUL A. MARTINEZ

05/27/2005

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: MARTINEZ, RAUL A  
Address: 2090 ARDENCROFT DR  
City-St-Zip: JACKSONVILLE, FL 32246

Title: VP ( ) Delete  
Name: MARTINEZ, MADELYNE I  
Address: 2090 ARDENCROFT DR  
City-St-Zip: JACKSONVILLE, FL 32246

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change ( ) Addition  
Name: MARTINEZ, RAUL A  
Address: 2090 ARDENCROFT DR  
City-St-Zip: JACKSONVILLE, FL 322461388 US

Title: DVPS (X) Change ( ) Addition  
Name: MARTINEZ, MADELYNE I  
Address: 2090 ARDENCROFT DR  
City-St-Zip: JACKSONVILLE, FL 322461388 US

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: RAUL A. MARTINEZ

DPT

05/27/2005

Electronic Signature of Signing Officer or Director

Date