

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000149985

Entity Name: ONE STOP SHOP, INC.

FILED
Apr 21, 2006
Secretary of State

Current Principal Place of Business:

5026 W. ATLANTIC AVE.
UNIT 170
DELRAY BEACH, FL 33484

New Principal Place of Business:

4075 BIRCHWOOD DR.
BOCA RATON, FL 33487

Current Mailing Address:

5026 W. ATLANTIC AVE.
UNIT 170
DELRAY BEACH, FL 33484

New Mailing Address:

4075 BIRCHWOOD DR.
BOCA RATON, FL 33487

FEI Number: 20-1839617

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COX, SHEPPARD
5026 W. ATLANTIC AVE.
UNIT 170
DELRAY BEACH, FL 33484 US

Name and Address of New Registered Agent:

COX, SHEPPARD
4075 BIRCHWOOD DR.
BOCA RATON, FL 33487 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: SHEPPARD COX

04/21/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: COX, SHEPPARD
Address: 5026 W. ATLANTIC AVE., UNIT 170
City-St-Zip: DELRAY BEACH, FL 33484

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: COX, SHEPPARD
Address: 4075 BIRCHWOOD DR.
City-St-Zip: BOCA RATON, FL 33487

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: SHEPPARD COX

PRES

04/21/2006

Electronic Signature of Signing Officer or Director

Date