2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006
Secretary of State

DOCUMENT# P05000096076

Entity Name: ORIA PACIFIC INC.

Current Principal Place of Business:

6880 SW 3RD STREET
PEMBROKE PINES, FL 33023 US

New Principal Place of Business:

437 SW COPPERFIELD AVENUE
PORT ST. LUCIE, FL 34953 US

Current Mailing Address:

6880 SW 3RD STREET
PEMBROKE PINES, FL 33023 US

New Mailing Address:

437 SW COPPERFIELD AVENUE
PORT ST. LUCIE, FL 34953 US

FEI Number: 20-3114505 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ASHBY, MELINDA E
6880 SW 3RD STREET
PEMBROKE PINES, FL 33023 US

Name and Address of New Registered Agent:

ASHBY, MELINDA E
437 SW COPPERFIELD AVENUE
PORT ST. LUCIE, FL 34953 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: MELINDA E. ASHBY 04/24/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PVD ( ) Delete
Name: ASHBY, MELINDA E
Address: 6880 SW 3RD STREET
City-St-Zip: PEMBROKE PINES, FL 33023 US

Title: ST ( ) Delete
Name: ASHBY, MELINDA E
Address: 6880 SW 3RD STREET
City-St-Zip: PEMBROKE PINES, FL 33023 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVD (X) Change ( ) Addition
Name: ASHBY, MELINDA E
Address: 437 SW COPPERFIELD AVENUE
City-St-Zip: PORT ST. LUCIE, FL 34953 US

Title: ST (X) Change ( ) Addition
Name: ASHBY, MELINDA E
Address: 437 SW COPPERFIELD AVENUE
City-St-Zip: PORT ST. LUCIE, FL 34953 US

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: MELINDA E. ASHBY PVDS 04/24/2006
Electronic Signature of Signing Officer or Director Date