2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000076039

Entity Name: FLORIDA OMEGA SERVICES INC

FILED Apr 25, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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105 PINEGROVE DR 7901 BAYMEADOWS CIR E

PALM COAST, FL 32164 321

JACKSONVILLE, FL 32256 US

Current Mailing Address: New Mailing Address:

105 PINEGROVE DR 7901 BAYMEADOWS CIR E

PALM COAST, FL 32164

JACKSONVILLE, FL 32256 US

FEI Number: 26-0466119 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:

SILVA, ALMIR

105 PINEGROVE DR

PALM COAST, FL 32164 US

SHOCKMEDIA CORPORATION
9766 OLD ST AUGUSTINE RD
2

JACKSONVILLE, FL 32257 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: JOSE JARDIM JUNIOR 04/25/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Delete Title: () Change () Addition

 Name:
 SILVA, ALMIR
 Name:

 Address:
 105 PINEGROVE DR
 Address:

 City-St-Zip:
 PALM COAST,, FL 32164
 City-St-Zip:

Title: VP () Delete Title: P (X) Change () Addition Name: SILVA, MARCOS V SILVA, MARCOS V

Address: 105 PINEGROVE DR Address: 7901 BAYMEADOWS CIR E
City-St-Zip: PALM COAST, FL 32164 City-St-Zip: JACKSONVILLE, FL 32257 US

Title: S () Delete Title: VP (X) Change () Addition

 Name:
 MULLER, NYVIA R
 Name:
 MULLER, NYVIA R

 Address:
 105 PINEGROVE DR
 Address:
 7901 BAYMEADOWS CIR E

 City-St-Zip:
 PALM COAST, FL 32164
 City-St-Zip:
 JACKSONVILLE, FL 32257 US

I hereby certify that the information supplied with this filing does not qualify 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: MARCOS SILVA P 04/25/2008