

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000043853

Entity Name: OCEAN IMAGE GLASS, INC.

FILED
Jan 25, 2005
Secretary of State

Current Principal Place of Business:

215 HICKMAN DRIVE
SANFORD, FL 32771 US

New Principal Place of Business:

686 HICKMAN CIRCLE
SUITE 100
SANFORD, FL 32771 US

Current Mailing Address:

215 HICKMAN DRIVE
SANFORD, FL 32771 US

New Mailing Address:

686 HICKMAN CIRCLE
SUITE 100
SANFORD, FL 32771 US

FEI Number: 59-3366237

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SMITH, CHERYL L
215 HICKMAN DRIVE
SANFORD, FL 32771 US

Name and Address of New Registered Agent:

SMITH, DONALD R
686 HICKMAN CIRCLE
SUITE 100
SANFORD, FL 32771 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: DONALD SMITH

01/25/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SMITH, CHERYL L
Address: 215 HICKMAN DRIVE
City-St-Zip: SANFORD, FL 32771 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SMITH, DONALD R
Address: 686 HICKMAN CIRCLE, STE. 100
City-St-Zip: SANFORD, FL 32771 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: DONALD R SMITH

PRES

01/25/2005

Electronic Signature of Signing Officer or Director

Date