

**2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Jul 19, 2005  
Secretary of State**

DOCUMENT# P98000029376

Entity Name: ORATRIX MARKETING, INC.

**Current Principal Place of Business:**

112 FLAGSHIP DR  
LUTZ, FL 33549

**New Principal Place of Business:**

116 FLAGSHIP DR  
LUTZ, FL 33549

**Current Mailing Address:**

112 FLAGSHIP DR  
LUTZ, FL 33549

**New Mailing Address:**

116 FLAGSHIP DR  
LUTZ, FL 33549

FEI Number: 59-3503027

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DAVIS, KEITH  
112 FLAGSHIP DRIVE  
LUTZ, FL 33549 US

**Name and Address of New Registered Agent:**

DAVIS, KEITH  
116 FLAGSHIP DRIVE  
LUTZ, FL 33549 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: KEITH DAVIS

07/19/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PSTD ( ) Delete  
Name: DAVIS, KEITH  
Address: 112 FLAGSHIP DRIVE  
City-St-Zip: LUTZ, FL 33549

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PSTD (X) Change ( ) Addition  
Name: DAVIS, KEITH  
Address: 116 FLAGSHIP DRIVE  
City-St-Zip: LUTZ, FL 33549

Title: DIR ( ) Change (X) Addition  
Name: EDINGTON, MICHAEL J MR  
Address: 116 FLAGSHIP DRIVE  
City-St-Zip: LUTZ, FL 33549

Title: DIR ( ) Change (X) Addition  
Name: ROTH, DAVID E MR  
Address: 116 FLAGSHIP DRIVE  
City-St-Zip: LUTZ, FL 33549

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: KEITH DAVIS

PRES

07/19/2005

Electronic Signature of Signing Officer or Director

Date