## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000099934

Entity Name: OCEANIC MARINE PRODUCTS INC

FILED Apr 29, 2009 Secretary of State

| Littly Name: Collaborative Probocto, inc.     |  |   |   |  |  |
|---|--|---|---|--|--|
| Current Principal Place of Business:          |  |   | New Principal Place                         | New Principal Place of Business:             |  |
|   | EWPORT CEI<br>D BEACH, FL                            |   |   |  |  |
| Current Mailing Address:                      |  |   | New Mailing Address                         | New Mailing Address:                         |  |
|   | EWPORT CEI<br>D BEACH, FL                            |   | 1239 W NEWPORT CI<br>DEERFIELD BEACH, F     |  |  |
| FEI Number:                                   | 65-0883257   | FEI Number Applied For ( )                        | FEI Number Not Applicable ( )               | Certificate of Status Desired ( )            |  |
| Name and Address of Current Registered Agent: |  |   | Name and Address of                         | Name and Address of New Registered Agent:    |  |
| DEERFIEL                                      | EWPORT CIF<br>D BEACH, FL                            | 33442 US  | ourpose of changing its registered          | d office or registered agent, or both,       |  |
| in the State                                  |  |   |   |  |  |
| SIGNATUR                                      | RE:  |   |   |  |  |
|   | Electro  | nic Signature of Registered Ag                    | ent   | Date   |  |
| Election Can                                  | npaign Financin                                      | g Trust Fund Contribution ( ).                    |   |  |  |
| OFFICERS AND DIRECTORS:                       |  |   | ADDITIONS/CHANGE                            | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | GRANDE, JOA<br>1241 W NEWF                           | ) Delete<br>N<br>YORT CENTER DR<br>EACH, FL 33442 | Title:<br>Name:<br>Address:<br>City-St-Zip: | ()Change ()Addition                          |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | VPD (<br>GRANDE, FRA<br>401 E. LINTON<br>DELRAY BCH, | BLVD  | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                      |  |

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: JOAN GRANDE P 04/29/2009