

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V24137

FILED
Mar 08, 2007
Secretary of State

Entity Name: OLYMPUS HOLDINGS, INC.

Current Principal Place of Business:

4 STAR ISLAND DRIVE
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

4 STAR ISLAND DRIVE
MIAMI BEACH, FL 33139

New Mailing Address:

FEI Number: 65-0321326

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HART, BRIAN A
2333 PONCE DE LEON BOULEVARD
SUITE 303
CORAL GABLES, FL 331340000 US

Name and Address of New Registered Agent:

HART, BRIAN A
255 ALHAMBRA CIRCLE
SUITE 850
CORAL GABLES, FL 33134 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:

03/08/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KRAMER, THOMAS
Address: 4 STAR ISLAND DRIVE
City-St-Zip: MIAMI BEACH, FL 33139

Title: VPS () Delete
Name: NEE, MARGARET
Address: 4 STAR ISLAND DRIVE
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: THOMAS KRAMER

PD

03/08/2007

Electronic Signature of Signing Officer or Director

Date