


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2005 08:00 AM
Secretary of State

DOCUMENT # F00000003669
 1. Entity Name
 OCEAN WEST ENTERPRISES, INC.



Principal Place of Business Mailing Address
 15991 RED HILL AVENUE #110 15991 RED HILL AVENUE #110
 TUSTIN, CA 92780 TUSTIN, CA 92780



04072005 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For
 33-0320824 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
 PARACORP INCORPORATED
 236 EAST 6TH AVE.
 TALLAHASSEE, FL 32303

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when rechartering) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PC
NAME	STEWART, MARSHALL
STREET ADDRESS	24872 SUNSTAR
CITY- ST- ZIP	DANA POINT, CA 92629
TITLE	VC
NAME	MEDDINGS, DARYL
STREET ADDRESS	21791 VIA DEL LAGO
CITY- ST- ZIP	TRABUCO CANYON, CA 92679
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

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 04/19/05-80073-015 158.75

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Daryl Meddings Date: 4/13/05 Daytime Phone #: (714)247-4220

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR