

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000005534

FILED  
Jan 27, 2004  
Secretary of State

Entity Name: ORODAY, INC.

**Current Principal Place of Business:**

2393 TELLER ROAD, SUITE 104  
NEWBURY PARK, CA 91320

**New Principal Place of Business:**

**Current Mailing Address:**

2393 TELLER ROAD, SUITE 104  
NEWBURY PARK, CA 91320

**New Mailing Address:**

FEI Number: 77-0374267

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CUMMINGS, KEVIN  
1844 CLOVER CIRCLE  
MELBOURNE, FL 32935 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: CP ( ) Delete  
Name: OROPESA, JOEL  
Address: 324 19TH STREET  
City-St-Zip: MANHATTAN BEACH, CA 90266

Title: VCS ( ) Delete  
Name: DAYMUDE, JEFF  
Address: 34 FALLBROOK AVENUE  
City-St-Zip: NEWBURY PARK, CA 91320

**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 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: JEFF DAYMUDE

VCS

01/27/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date