

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006439

Entity Name: OVACOME USA, INC.

Current Principal Place of Business:

2103 SHADY POINT LANE
BRANDON, FL 33510

FILED
Jan 04, 2015
Secretary of State
CC1808940628

Current Mailing Address:

P.O. BOX 152893
TAMPA, FL 33684-2893

FEI Number: 20-1349867

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SMITH, KELLY J
2103 SHADY POINT LANE
BRANDON, FL 33510 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: KELLY J. SMITH

01/04/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name SNYDER, KIMBERLY S
Address 2965 164TH AVENUE NORTH
City-State-Zip: CLEARWATER FL 33760

Title D
Name MARTINEZ, CAROLE
Address 16701 LONGLEAT DRIVE
City-State-Zip: LUTZ FL 33549

Title D
Name WALKER, KRIS
Address 4110 MARRIETTA STREET
City-State-Zip: TAMPA FL 33616

Title DIRECTOR
Name WALKER, KRISTY
Address 3912 W WALLACE AVE
City-State-Zip: TAMPA FL 33611

Title DIRECTOR
Name TAYLOR, HUNTER
Address 1810 E. PALM AVE. #4208
City-State-Zip: TAMPA FL 33065

Title DIRECTOR
Name JIMENEZ, CARLA
Address 400 BEACH DR. NE #1201
City-State-Zip: ST. PETERSBURG FL 33701

Title PRESIDENT
Name SMITH, KELLY J
Address 2103 SHADY POINT LANE
City-State-Zip: BRANDON FL 33510

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KIMBERLY S SNYDER

PAST PRESIDENT

01/04/2015

Electronic Signature of Signing Officer/Director Detail

Date