

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000010847

Entity Name: OPTIMUM SERVICES ORGANIZATION, INC

Current Principal Place of Business:

5839 WHIRLAWAY RD.
PALM BEACH GARDENS, FL 33418

Current Mailing Address:

5839 WHIRLAWAY RD.
PALM BEACH GARDENS, FL 33418 US

FEI Number: 27-4008745

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VASQUEZ, JUAN C
5839 WHIRLAWAY RD.
PALM BEACH GARDENS, FL 33418 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P, T.
Name VASQUEZ, JUAN C
Address 5839 WHIRLAWAY RD.
City-State-Zip: PALM BEACH GARDENS FL 33418

Title VP
Name ROLDAN, HECTOR A
Address 348- SUITE 205 MUSKOKA RD 3
NORTH
City-State-Zip: HUNTSVILLE ON P1H 1-H8

Title S
Name VASQUEZ, KRISTA J
Address 5839 WHIRLAWAY RD.
City-State-Zip: PALM BEACH GARDENS FL 33418

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: JUAN VASQUEZ

PRESIDENT

04/27/2015

Electronic Signature of Signing Officer/Director Detail

Date