2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13000030894

Entity Name: OSTHUS INC.

FILED Feb 07, 2018 **Secretary of State** CC0899757114

Current Principal Place of Business:

1990 WEST NEW HAVEN AVE

SUITE 301

MELBOURNE, FL 32904

Current Mailing Address:

1990 WEST NEW HAVEN AVE SUITE 301

MELBOURNE, FL 32904 US

FEI Number: 46-2452003 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MUSGROVE, RALPH 19372 EAST COUNTRY CLUB DRIVE AVENTURA, FL 33180 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:

PRESIDENT Title Title **SECRETARY** OSTHUS, DR. TORSTEN BRAUN, IVONNE Name Name

Address 1990 WEST NEW HAVEN AVE Address 1990 WEST NEW HAVEN AVE

SUITE 301 SUITE 301

MELBOURNE FL 32904 MELBOURNE FL 32904 City-State-Zip: City-State-Zip:

Title **DIRECTOR** Title

COLSMAN, WOLFGANG MUSGROVE, RALPH MARTIN Name Name

1990 WEST NEW HAVEN AVE 1990 WEST NEW HAVEN AVE Address Address SUITE 301

SUITE 301

MELBOURNE FL 32904 City-State-Zip: MELBOURNE FL 32904 City-State-Zip:

Title CEO Title D

MOHR, ANDREAS Name LITTLE, ERIC DR. Name

1990 WEST NEW HAVEN AVE - STE. 1990 WEST NEW HAVEN AVE Address Address

SUITE 301

MELBOURNE FL 32904 City-State-Zip: MELBOURNE FL 32904 City-State-Zip:

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

SIGNATURE: IVONNE BRAUN

Electronic Signature of Signing Officer/Director Detail

SECRETARY

02/07/2018