## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 285163**

City-St-Zip:

VERO BEACH, FL

FILED Jan 10, 2009 Secretary of State

Entity Nar	ne: OSLO INC	<u> </u>			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
695 S US HWY #1 P O BOX 1208 VERO BCH, FL 32961			695 S US HWY #1 VERO BCH, FL 3296	695 S US HWY #1 VERO BCH, FL 32962	
Current M	ailing Addres	s:	New Mailing Addres	New Mailing Address:	
695 S US F P O BOX 1 VERO BCF			P O BOX 1208 VERO BCH, FL 3296	1	
FEI Number:	59-1097317	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
EGAN, JR, J.B. 695 SOUTH US HWY 1 P O BOX 1208 VERO BEACH, FL 32962 US				EGAN, III, J.B. 695 SOUTH US HWY 1 VERO BEACH, FL 32962 US	
	named entity s of Florida.	ubmits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,	
SIGNATURE: J B EGAN, III				01/10/2009	
	Electron	ic Signature of Registered Age	ent	Date	
Election Can	npaign Financing	Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	VD () SEXTON, ROBE 8055 66TH AVE VERO BEACH, F	NUE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	STD () EGAN III,J B, 4631 9TH PLAC VERO BEACH, I		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address:	P () SEXTON, CHAR 4650 17TH STR	•	Title: Name: Address:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

City-St-Zip:

SIGNATURE: J B EGAN, III ST 01/10/2009