

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000004967

FILED
Feb 14, 2009
Secretary of State

Entity Name: OSMUND HOLDINGS LIMITED, INC.

Current Principal Place of Business:

113 DAVENPORT RD.
%E REALTY SVCS.
TORONTO, ONTARIO M5R 1H8,

Current Mailing Address:

113 DAVENPORT RD.
%E REALTY SVCS.
TORONTO, ONTARIO M5R 1H8,

New Principal Place of Business:

113 DAVENPORT RD.
%E REALTY SVCS.
TORONTO, ONTARIO M5R 1H8, CA XXXXXXXX

New Mailing Address:

113 DAVENPORT RD.
%E REALTY SVCS.
TORONTO, ONTARIO M5R 1H8, CA XXXXXXXX

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: PD () Delete
Name: ETKIN, SHARON
Address: 113 DAVENPORT ROAD
City-St-Zip: TORONTO, CANADA, M5R 1H8

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD () Change (X) Addition
Name: E REALTY SERVICES LI, MITED
Address: 113 DAVENPORT ROAD
City-St-Zip: TORONTO, ONTARIO M5R 1H8, CA XXXXXXXX

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.

SIGNATURE: BRETT ETKIN

PD

02/14/2009

Electronic Signature of Signing Officer or Director

Date