

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K18687

FILED
Mar 26, 2008
Secretary of State

Entity Name: OVERSEAS SERVICES INTERNATIONAL CORP.

Current Principal Place of Business:

1001 BRICKELL BAY DRIVE
SUITE 1716
MIAMI, FL 33131 US

New Principal Place of Business:

Current Mailing Address:

1001 BRICKELL BAY DRIVE
SUITE 1716
MIAMI, FL 33131 US

New Mailing Address:

FEI Number: 65-0037701 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HLAVACEK, ALEX
320 85TH STREET
#14
MIAMI BEACH, FL 33141 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: DP () Delete
Name: LANDAU, MARISOL
Address: 1001 BRICKELL BAY DR, STE. 1716
City-St-Zip: MIAMI, FL 33131

Title: SD () Delete
Name: NEIRA, ELIDA DEL C.
Address: 1001 BRICKELL BAY DR., STE. 1716
City-St-Zip: MIAMI, FL 33131

Title: TD () Delete
Name: LOMBARDO, MARCELA DE
Address: 1001 BRICKELL BAY DR., STE. 1716
City-St-Zip: MIAMI, FL 33131

Title: VP () Delete
Name: ESTRISPEAUT, RAUL
Address: 1001 BRICKELL BAY DR., STE. 1716
City-St-Zip: MIAMI, FL 33131

Title: VP () Delete
Name: MULLER, ARTURO
Address: 1001 BRICKELL BAY DR., STE. 1716
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: ALEX HLAVACEK

RA

03/26/2008

Electronic Signature of Signing Officer or Director

Date