

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K59415 (5)

1. Corporation Name

OSHSO, INC.



Principal Place of Business

Mailing Address

**3600 N.W. 82 AVE
P.O. BOX 20816
MIAMI FL 33166**

**3600 N.W. 82 AVE
P.O. BOX 20816
MIAMI FL 33166**

3. Date Incorporated or Qualified

01/19/1989

3a. Date of Last Report

02/14/1995

4. FEI Number

38-2853268

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No **files consp. return**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

**HERRON, JAMES M.
3600 NW 82ND AVE
MIAMI FL 33102-0816**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and fee if applicable

Signature, typed or printed name of new registered agent and fee if applicable

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> DELETE
DT	GING, MARY	3600 NW 82ND AVE	MIAMI FL	<input type="checkbox"/>
VSD	BRUMMER, ARLENE	3600 NW 82ND AVE	MIAMI FL	<input type="checkbox"/>
DV	FINNEY, GRAY P.	3600 NW 82ND AVE	MIAMI FL	<input type="checkbox"/>
AS	BAYNE, BEVERLY	3600 NW 82 AVE	MIAMI FL	<input type="checkbox"/>
P	WHITMER, DONN B	3600 NW 82 AVE	MIAMI FL	<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Mary K. Ging **UP Mary K. Ging, Treasurer** **01/22/96 (305) 593-3137**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (City, State, Zip) (Date) (Telephone Number)

CR2E034 (12/95)

10/01/95

OSHCO, INC.
(Florida)

OFFICERS

DONN B. WHITMER
ARLENE BRUMMER
P. GRAY FINNEY
MARY GING
BEVERLY BAYNE

PRESIDENT
VICE PRESIDENT & SECRETARY
VICE PRESIDENT
TREASURER
ASSISTANT SECRETARY

DIRECTORS

ARLENE BRUMMER
P. GRAY FINNEY
MARY GING

3600 N. W. 82nd AVENUE
MIAMI, FLORIDA 33166