

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000093057

FILED  
Feb 24, 2009  
Secretary of State

Entity Name: OESHO, LLC

**Current Principal Place of Business:**

260 CRANDON BLVD., SUITE 53  
KEY BISCAYNE, FL 33146

**New Principal Place of Business:**

**Current Mailing Address:**

260 CRANDON BLVD., SUITE 53  
KEY BISCAYNE, FL 33146

**New Mailing Address:**

FEI Number: 26-3468023

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CORPORATE CREATIONS NETWORK, INC.  
11380 PROSPERITY FARMS ROAD #221E  
PALM BEACH GARDENS, FL 33410 US

**Name and Address of New Registered Agent:**

HOLDING MANAGEMENT, LLC  
260 CRANDON BLVD. SUITE 18  
KEY BISCAYNE, FL 33149 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: JLA

02/24/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: ARISTIZABAL, JOSE  
Address: 260 CRANDON BLVD., SUITE 53  
City-St-Zip: KEY BISCAYNE, FL 33146

Title: MGR ( ) Delete  
Name: URIBE, CATALINA  
Address: 260 CRANDON BLVD., SUITE 53  
City-St-Zip: KEY BISCAYNE, FL 33146

**ADDITIONS/CHANGES:**

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JOSE L ARISTIZABAL

MGR

02/24/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date