2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L64611

FILED Feb 01, 2006 Secretary of State

DOCON		0-1011				Secretary of	State
Entity Na	me: OOLIT	T ADVANTAGE IN	C.				
Current Principal Place of Business:				New Principal Place of Business:			
4627 DUN TAMPA, F	INIE DRIVE L 33614						
Current Mailing Address:				New Mailing Address:			
4627 DUN TAMPA, F	INIE DRIVE L 33614						
FEI Number	: 59-3144284	FEI Number Ap	plied For() FEI	Number Not Appl	icable ()	Certificate of Status Des	ired ()
Name and	l Address o	of Current Registe	red Agent:	Name and	Address of	New Registered Agent	::
PATEL, DI 4627 DUN TAMPA, F	INIE DRIVE	US					
	named ent e of Florida.		ement for the purpos	e of changing i	ts registered	office or registered ager	nt, or both,
SIGNATU	RF.						
01011/1101		tronic Signature of I	Reaistered Aaent			 Date	
Election Car		icing Trust Fund Cont					
Licction Ca	inpaign i mai	iong mastrana cont	indution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PD PATEL, DE 4627 DUNN TAMPA, FL	IIE DR		Title: Name: Address: City-St-Zip:	(() Change () Addition	
Title: Name: Address: City-St-Zip:	TD PATEL, UM 4627 DUNN TAMPA, FL	IIE DR		Title: Name: Address: City-St-Zip:	PATEL, KEVA 100 ARCH ST	(X) Change () Addition AL U IREET, APT: 3A IIA, PA 19106 US	
Title: Name: Address: City-St-Zip:	S KOMAL, PA 4627 DUNN TAMPA, FL	IIE DR		Title: Name: Address: City-St-Zip:	KOMAL, PAT	E PARK DRIVE	
Title: Name: Address: City-St-Zip:	PD PATEL, DE 4627 DUNN TAMPA, FL	IIE DRIVE		Title: Name: Address: City-St-Zip:	EX (PATEL, DEVA 4627 DUNNIE TAMPA, FL 3	DRIVE	
Title:	s	(X) Delete		Title:	(() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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.

Name:

Address:

City-St-Zip:

SIGNATURE: DEEPTY PATEL PD 02/01/2006

PATEL, KOMAL

4627 DUNNIE DRIVE

TAMPA, FL 33614

Name:

Address:

City-St-Zip: