

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008627

Entity Name: OZZIE'S ANGELS, INC.

FILED
Jun 24, 2009
Secretary of State

Current Principal Place of Business:

7345 GLENEADLE DR
MIAMI LAKES, FL 33014

New Principal Place of Business:

4630 SW 135TH AVE.
MIAMI, FL 33175

Current Mailing Address:

PO BOX 5376
HIALEAH, FL 33014

New Mailing Address:

4630 SW 135TH AVE.
MIAMI, FL 33175

FEI Number: 26-1104578 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

FARAH, JESSICA A
7345 GLENEAGLE DR
MIAMI LAKES, FL 33014 US

Name and Address of New Registered Agent:

NUNEZ, KARINA M
7345 GLENEAGLE DR
MIAMI LAKES, FL 33014 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: KARINA NUNEZ

06/24/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: FARAH, JESSICA A
Address: 7345 GLENEAGLE DR
City-St-Zip: MIAMI LAKES, FL 33014

Title: VP () Delete
Name: FARAH, STEPHANIE A
Address: 7345 GLENEADLE DR
City-St-Zip: MIAMI LAKES, FL 33014

Title: S (X) Delete
Name: RIVERA, ANA
Address: 4837 SW 146 PLACE
City-St-Zip: MIAMI, FL 33175

Title: T (X) Delete
Name: ARTIME, JORGE
Address: 13241 S.W. 1ST STREET
City-St-Zip: MIAMI, FL 33184

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change () Addition
Name: NUNEZ, KARINA M
Address: 4630 SW 135TH AVE.
City-St-Zip: MIAMI, FL 33175

Title: VP (X) Change () Addition
Name: FELICIANO, ERIC A
Address: 1125 MEADOWLARK AVE
City-St-Zip: MIAMI SPRINGS, FL 33166

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KARINA NUNEZ

PT

06/24/2009

Electronic Signature of Signing Officer or Director

Date