

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000022266

Entity Name: OVERSEAS SOURCE, INC.

FILED  
Apr 20, 2009  
Secretary of State

## Current Principal Place of Business:

10801 NW 122 ST  
MEDLEY, FL 33178

## New Principal Place of Business:

10056 NW 43RD TERRACE  
MIAMI, FL 33178

## Current Mailing Address:

10056 NW 43RD TERR.  
MIAMI, FL 33178

## New Mailing Address:

FEI Number: 65-0991902

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CARO, ORLANDO  
10056 NW 43RD TERR.  
MIAMI, FL 33178 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: PD ( ) Delete  
Name: CARO, CESAR  
Address: 10056 NW 43 TERRACE  
City-St-Zip: MIAMI, FL 33178

Title: VPTD ( ) Delete  
Name: CARO, HUGO  
Address: 10056 NW 43 TERRACE  
City-St-Zip: MIAMI, FL 33178

Title: SD ( ) Delete  
Name: CARO, ORLANDO  
Address: 10056 NW 43 TERRACE  
City-St-Zip: MIAMI, FL 33178

Title: D ( ) Delete  
Name: CARO, JOSE LUIS  
Address: 10056 NW 43 TERRACE  
City-St-Zip: MIAMI, FL 33178

Title: D (X) Delete  
Name: CASTILLO, KATTIA  
Address: 6120 NW 116 PL #416  
City-St-Zip: MIAMI, FL 33178

## 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: CESAR CARO

P

04/20/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date