## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000056310

OSMAN, TY. H

4539 TROUSDALE DRIVE

NASHVILLE, TN 37204

Name:

Address:

City-St-Zip:

**FILED** Apr 29, 2007 Secretary of State

Entity Name: COTOMO CORP. **Current Principal Place of Business: New Principal Place of Business:** 1474-A WEST 84 STREET HIALEAH, FL 33014 **Current Mailing Address: New Mailing Address:** 1474-A WEST 84 STREET HIALEAH, FL 33014 FEI Number: 03-0418611 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: OSMAN, L. MICHAEL 1474-A WEST 84 STREET HIALEAH, FL 33014 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: (X) Change ( ) Addition OSMAN, CRAIG A MARCH, MILDRED Name: Name: 17415 NW 85 AVENUE 1474-A WEST 84 STREET Address: Address: City-St-Zip: HIALEAH, FL 33015 City-St-Zip: HIALEAH, FL 33014 US Title: VPSD () Delete Title: () Change () Addition OSMAN, L. MICHAEL Name: Name: 1474-A WEST 84 STREET Address: Address: HIALEAH, FL 330143363 City-St-Zip: City-St-Zip: Title: Title: VPD. ( ) Delete VPD (X) Change ( ) Addition

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.

Name:

Address:

City-St-Zip:

OSMAN, MENE'S

15950 WEST PRESTWICK PLACE

MIAMI LAKES, FL 33014 US

VΡ SIGNATURE: L MICHAEL OSMAN 04/29/2007