2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 29, 2008
Secretary of State

DOCUMENT# P00000089018

Entity Name: RUBY SLIPPERS IN OZ CORP.

Current Principal Place of Business:

1205 S MAGNOLIA DR
INDIALANTIC, FL 32903

New Principal Place of Business:

Current Mailing Address:

1205 S MAGNOLIA DR
INDIALANTIC, FL 32903

New Mailing Address:

FEI Number: 59-3674176 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

EDCOLAW, INC.
6 EAST BAY STREET
SUITE 500
JACKSONVILLE, FL 32202 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: MILLER, STUART P
Address: 426 PIRATE'S MOON COURT
City-St-Zip: INDIALANTIC, FL 32903

Title: V ( ) Delete
Name: O'HARA, DOREE
Address: 1205 S. MAGNOLIA DRIVE
City-St-Zip: INDIALANTIC, FL 32903

Title: ST ( ) Delete
Name: GOUGELMAN, PAUL R III
Address: 900 E STRAWBRIDGE AVENUE
City-St-Zip: MELBOURNE, FL 32901

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: O'HARA, DOROTHY
Address: 1205 S. MAGNOLIA DRIVE
City-St-Zip: INDIALANTIC, FL 32903

Title: VP (X) Change ( ) Addition
Name: MILLER, STUART P
Address: 426 PIRATE'S MOON COURT
City-St-Zip: INDIALANTIC, FL 32903

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: DOROTHY O'HARA PD 02/29/2008

Electronic Signature of Signing Officer or Director — Date