

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P01000003071

Entity Name: RALPH OSBORN, INC.

FILED
Jun 05, 2006
Secretary of State

Current Principal Place of Business:

1520 ARGYLE DR.
FT. LAUDERDALE, FL 33312

New Principal Place of Business:

483 LAKE COMO DRIVE
POMONA PARK, FL 32181

Current Mailing Address:

1520 ARGYLE DR.
FT. LAUDERDALE, FL 33312

New Mailing Address:

FEI Number: 59-1833391

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OSBORN, RALPH G
1520 ARGYLE DR.
FT. LAUDERDALE, FL 33312 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

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: OSBORN, RALPH G
Address: 1520 ARGYLE DR.
City-St-Zip: FT. LAUDERDALE, FL 33312

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: CASTRAVONA, JOSEPH VP
Address: 483 LAKE COMO DRIVE
City-St-Zip: POMONA PARK, FL 32181 US

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.

SIGNATURE: RALPH G OSBORN

PSD

06/05/2006

Electronic Signature of Signing Officer or Director

Date