2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000078513

Entity Name: ONSITE LAND SERVICES, INC.

FILED May 03, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

100 BAY VIEW DRIVE 4840 SW 196TH LANE

SUITE # 903 SOUTHWEST RANCHES, FL 33332 SUNNY ISLES, FL 33160

Current Mailing Address: New Mailing Address:

P O BOX 601324 4840 SW 196TH LANE

NO. MIAMI BEACH, FL 33160 SOUTHWEST RANCHES, FL 33332

FEI Number: 65-1139617 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:

ORTIZ, FABIO ORTIZ, FABIO 100 BAY VIEW DRIVE 4840 SW 196TH LANE

APT. #903 SOUTHWEST RANCHES, FL 33332 US SUNNY ISLES, FL 33160 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: FABIO ORTIZ 05/03/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 D
 () Delete
 Title:
 D
 (X) Change () Addition

 Name:
 ORTIZ, FABIO
 Name:
 ORTIZ, FABIO

Address: 100 BAY VIEW DRIVE, APT. #903 Address: 4840 SW 196TH LANE

City-St-Zip: SUNNY ISLES, FL 33160 City-St-Zip: SOUTHWEST RANCHES, FL 33332

Title: V () Delete Title: V (X) Change () Addition

 Name:
 ORTIZ, KATIUSKA
 Name:
 ORTIZ, KATIUSKA

 Address:
 100 BAY VIEW DRIVE
 Address:
 4840 SW 196TH LANE

City-St-Zip: SUNNY ISLES, FL 33160 City-St-Zip: SOUTHWEST RANCHES, FL 33332

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: FABIO ORTIZ D 05/03/2006