

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000035109

Entity Name: OHM, INC.

FILED
Feb 12, 2007
Secretary of State

Current Principal Place of Business:

CIGARETTE MART
370 NORTH HIGHWAY 17-92
LONGWOOD, FL 32750

New Principal Place of Business:

SUNNY'S MINI MART
101 S. FRENCH AVE
SANFORD, FL 32771

Current Mailing Address:

PATEL SHITAL
871 BLAIRMONT LANE
LAKE MARY, FL 32746

New Mailing Address:

FEI Number: 03-0416137 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PATEL, SHITAL
871 BLAIRMONT LANE
LAKE MARY, FL 32746 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: PTD () Delete
Name: PATEL, SHITAL
Address: 871 BLAIRMONT LANE
City-St-Zip: LAKE MARY, FL 32746

Title: VSD () Delete
Name: PATEL, SHIRISH S
Address: 871 BLAIRMONT LANE
City-St-Zip: LAKE MARY, FL 32746

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: SHITAL PATEL

PTD

02/12/2007

Electronic Signature of Signing Officer or Director

Date