2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000047467

1. Entity Name
ON TIME CSI, INC.



FILED Feb 22, 2008 08:00 AM Secretary of State

Principal Place of Business

130 WATER OAK WAY OLD SAMAR, FL 34677 Mailing Address

113 COZUMEL COURT SOLANA BEACH, CA 92075

US



CR2E034 (11/05)

DO	NOT	WRITE	IN	THIS	SPACE
UU.	NOI	AAKIIC	1174	ITIO	SPACE

4. FEI Number		Applied For
02-0593204	 	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required	

5. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145

DO NOT WRITE IN THIS SPACE

No Chg-P

01042008

6. The above the obligat	named entity submits this statement for the priors of registered agent.	rpose of changing its register	ed office or r	egistered agent, or bo	oth, in the State of Flori	ida. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title if	applicable (NOTE: Registers	d Agent signature	required when reinstating)		DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Finar Trust Fund Contribution.		\$5.00 May Be Added to Fees		
10. TITLE NAME STREET ADORESS CITY-ST-ZIP	OFFICERS AND DIREC PTD DINSMORE, DUSTIN LEE 130 WATER OAK WAY OLDSMAR, FL 34677	TORS			U000008	34788
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVD SWEDBERG, THOMAS 130 WATER OAK WAY OLDSMAR, FL 34677				02/29/08-8	34788 30006-006 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT W	RITE
NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SP	ACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
NAME STREET ADDRESS CITY-ST-ZIP	্তি শ্ৰী সংগ্ৰাহ কৰি কাৰ্যা কৰি	* - * * * * * * * * * * * * * * * * * *	L			
12. I hereby o	certify that the information supplied with this fil	ing does not qualify for the ex-	emptions co	ntained in Chapter 11	9, Florida Statutes. I f	urther certify that the information -

12. Thereby certify that the information supplied with this liting does not qualify for the exemptions contained in Citager 115, Proha Statutes. That the control that I am an officer of 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

THAT THE AND THE OF SECTION OF SCHOOL OF SECTION

2-15-08

222-3107

Daytime Phone #