

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000108202

FILED
May 02, 2009
Secretary of State

Entity Name: SMALL OX DELIVERY SERVICE, INC.

Current Principal Place of Business:

6320 SW 19 STREET
MIRAMR, FL 33023 US

New Principal Place of Business:

Current Mailing Address:

6320 SW 19 ST
MIRAMAR, FL 33023 US

New Mailing Address:

5420 NW 11 STREET
#307
PLANTATION, FL 33313 US

FEI Number: 20-0272298

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEWIN, KARLENE B
6320 SW 19 ST
MIRAMAR, FL 33023 US

Name and Address of New Registered Agent:

HICKS, ROBBIE G
5420 NW 11 STREET
#307
PLANTATION, FL 33313 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: ROBBIE HICKS

05/02/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LEWIN, HUGH R
Address: 6320 SW 19 STREET
City-St-Zip: MIRAMAR, FL 33023 US

Title: S, T () Delete
Name: LEWIN, KARLENE B T
Address: 6320 SW 19 ST
City-St-Zip: MIRAMAR, FL 33023 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S, T (X) Change () Addition
Name: HICKS, ROBBIE T
Address: 5420 NW 11 STREET
City-St-Zip: PLANTATION, FL 33313 US

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: HUGH LEWIN

P

05/02/2009

Electronic Signature of Signing Officer or Director

Date