# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 29, 2005**
**Secretary of State**

DOCUMENT# P04000154370

**Entity Name:** OSMO'S CORP

**Current Principal Place of Business:**

1231 FAIRLAKE TRACE
APT #609
WESTON, FL 33326 US

**New Principal Place of Business:**

3670 SAN SIMEON CIRCLE
WESTON, FL 33331 US

**Current Mailing Address:**

1231 FAIRLAKE TRACE
APT #609
WESTON, FL 33326 US

**New Mailing Address:**

3670 SAN SIMEON CIRCLE
WESTON, FL 33331 US

**FEI Number: 20-1866706** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

QUINTERO, OSCAR A
1231 FAIRLAKE TRACE
#609
WESTON, FL 33326 US

**Name and Address of New Registered Agent:**

QUINTERO, OSCAR A
3670 SAN SIMEON CIRCLE
WESTON, FL 33331 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: OSCAR A QUINTERO 04/29/2005
Electronic Signature of Registered Agent Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete
Name: CLAUDIA, ZABINI
Address: 1231 FAIRLAKE TRACE APT#609
City-St-Zip: WESTON, FL 33326 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition
Name: CLAUDIA, ZABINI
Address: 36 70 SAN SIMEON CIRCLE
City-St-Zip: WESTON, FL 33331 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CLAUDIA ZABINI MRS 04/29/2005
Electronic Signature of Signing Officer or Director Date