2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2009
Secretary of State

DOCUMENT# P05000054941

Entity Name: OSSNA COMPUTERWORKS, INC

Current Principal Place of Business:

338 SW TWIG AVE.
PORT ST. LUCIE, FL 34983

New Principal Place of Business:

Current Mailing Address:

338 SW TWIG AVE.
PORT ST. LUCIE, FL 34983 US

New Mailing Address:

10018 SW CHADWICK DRIVE
PORT ST. LUCIE, FL 34987 US

FEI Number: 20-2679648 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AHUJA, SUNIL MR.
338 SW TWIG AVE.
PORT ST. LUCIE, FL 34983 US

Name and Address of New Registered Agent:

AHUJA, SUNIL MR.
10018 SW CHADWICK DRIVE
PORT ST. LUCIE, FL 34987 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: 03/28/2009
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: CPD ( ) Delete
Name: AHUJA, SUNIL MR.
Address: 338 SW TWIG AVE.
City-St-Zip: PORT ST. LUCIE, FL 34982 US

Title: VP ( ) Delete
Name: AHUJA, NILAM MS.
Address: 338 SW TWIG AVE.
City-St-Zip: PORT ST. LUCIE, FL 34983 US

Title: VP ( ) Delete
Name: AHUJA, SHANTA MRS.
Address: 338 SW TWIG AVE.
City-St-Zip: PORT ST. LUCIE, FL 34983 US

Title: VP ( ) Delete
Name: COTE, DONNA MS.
Address: 1839 SE HIDEAWAY CIRCLE
City-St-Zip: PORT ST. LUCIE, FL 34985 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CPD (X) Change ( ) Addition
Name: AHUJA, SUNIL MR.
Address: 10018 SW CHADWICK DRIVE
City-St-Zip: PORT ST. LUCIE, FL 34987 US

Title: VP (X) Change ( ) Addition
Name: AHUJA, NILAM MS.
Address: 10642 SW WESTLAWN BLVD.
City-St-Zip: PORT ST. LUCIE, FL 34987 US

Title: VP (X) Change ( ) Addition
Name: AHUJA, SHANTA MRS.
Address: 10018 SW CHADWICK DRIVE
City-St-Zip: PORT ST. LUCIE, FL 34987 US

Title: VP (X) Change ( ) Addition
Name: COTE, DONNA MS.
Address: 10018 SW CHADWICK DRIVE
City-St-Zip: PORT ST. LUCIE, FL 34987 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: SUNIL AHUJA CPD 03/28/2009
Electronic Signature of Signing Officer or Director — Date