P05000070648

FOR PROFIT CORPORATION
2006 UNIFORM BUSINESS REPORT (UBR)

FILED

06 JUN 29 PM 12:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P05000070648

1. Entity Name

Osbourne on the Road Corp

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66018055

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2. Principal Place of Business	3. Mailing Address
3001 South State Road 7, #A40	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Hollywood, FL	City & State
Zip: 33021 / Country	Zip / Country

4. FEI Number: 20-2833161 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

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7. Name and Address of Current Registered Agent

Name: John Osborne

Street Address (P.O. Box Number is Not Acceptable): 3001 South State Road 7 ste. A40

City: Hollywood FL FL Zip Code: 33021

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fee

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	John Osborne
STREET ADDRESS	3001 South State Road 7, Ste. A40
CITY-ST-ZIP	Hollywood, FL 33021
TITLE	
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04/29/06-80129-020 150.00

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12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: X John Osborne John Osborne, Pres. 4-15-06 954-257-1926

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #