2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000084297

Entity Name: OSHYNEE ENTERPRISES, INC.

FILED Feb 07, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
3749D GU SUITE 301	LF BREEZE P	ARKWAY			
	EEZE, FL 3250	33 US			
Current Mailing Address:			New Mailing Address:		
3749D GULF BREEZE		ARKWAY			
SUITE 301 GULF BRE	I EEZE, FL 3250	33 US			
FEI Number	: 20-5084445	FEI Number Applied For ()	FEI Number Not App	licable ()	Certificate of Status Desired (X)
Name and	Address of C	Current Registered Agent:	Name and	Address of	New Registered Agent:
SUITE 301	LF BREEZE P				
	named entity e of Florida.	submits this statement for the	purpose of changing i	its registered	office or registered agent, or both
SIGNATUI	RE:				
	Electror	nic Signature of Registered Ag	ent		Date
Election Ca	mpaign Financin	g Trust Fund Contribution ().			
OFFICER	S AND DIREC	TORS:	ADDITION	IS/CHANGE	S TO OFFICERS AND DIRECTO
Title: Name: Address: City-St-Zip:	LACEY, JIM	Delete REEZE PARKWAY SUITE 301 FL 32563 US	Title: Name: Address: City-St-Zip:	,	() Change () Addition
Title: Name: Address: City-St-Zip:	S (MAZZOLA, DEI 1257 GRAND F GULF BREEZE	RIDGE CIRCLE	Title: Name: Address: City-St-Zip:	MAZZOLA, D 1257 GRAND	(X) Change()Addition EBORAH) RIDGE CIRCLE ZE, FL 32563 US
Title: Name: Address: City-St-Zip:	LACEY, MELIS	EEZE PARKWAY	Title: Name: Address: City-St-Zip:	LACEY, MEL 3749 GULF E	(X) Change ()Addition ISSA BREEZE PARKWAY #301 ZE, FL 32563 US
Title: Name: Address: City-St-Zip:	()) Delete	Title: Name: Address: City-St-Zip:	LACEY, CATI 405 KENILW	

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: DEBBIE MAZZOLA T 02/07/2008