

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000084913

Entity Name: OXXO RESEARCH, INC.

FILED  
May 01, 2007  
Secretary of State

**Current Principal Place of Business:**

186 CECIL DURRANCE ROAD  
WAUCHULA, FL 33873

**New Principal Place of Business:**

**Current Mailing Address:**

186 CECIL DURRANCE ROAD  
WAUCHULA, FL 33873

**New Mailing Address:**

FEI Number: 22-3936627

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

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

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: \_\_\_\_\_

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: DPST ( ) Delete  
Name: OXXLLEY, C.N.K. OWUSU  
Address: 186 CECIL DURRANCE ROAD  
City-St-Zip: ZOLFO SPRINGS, FL 33890

Title: VP ( ) Delete  
Name: LEE, KATHY  
Address: 186 CECIL DURRANCE ROAD  
City-St-Zip: ZOLFO SPRINGS, FL 33890

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

Title: DPST (X) Change ( ) Addition  
Name: OWUSU, OXXLLEY C  
Address: 186 CECIL DURRANCE ROAD  
City-St-Zip: WAUCHULA, FL 33873

Title: VP (X) Change ( ) Addition  
Name: LEE, KATHY  
Address: 186 CECIL DURRANCE ROAD  
City-St-Zip: WAUCHULA, FL 33873

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: OXXLLEY C.N.K. OWUSU

DPST

05/01/2007

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date