

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000143094

Entity Name: OZLOSO INC

FILED
Jan 05, 2007
Secretary of State

Current Principal Place of Business:

4433 SW 14 AVE
CAPE CORAL, FL 33914

New Principal Place of Business:

3165 E. RIVERSIDE DR
#4
CAPE CORAL, FL 33916

Current Mailing Address:

4433 SW 14 AVE
CAPE CORAL, FL 33914

New Mailing Address:

3165 E. RIVERSIDE DR
#4
CAPE CORAL, FL 33916

FEI Number: 20-5889821

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OZORIO, GENILSON
4433 SW 14 AVE
CAPE CORAL, FL 33914 US

Name and Address of New Registered Agent:

OZORIO, GENILSON
3165 E. RIVERSIDE DR
#4
CAPE CORAL, FL 33916 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: GENILSON OZORIO

01/05/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LOPES, ROBSON
Address: 4433 SW 14 AVE
City-St-Zip: CAPE CORAL, FL 33914

Title: VP () Delete
Name: SOARES, NELIO
Address: 4433 SW 14 AVE
City-St-Zip: CAPE CORAL, FL 33914

Title: SEC () Delete
Name: OZORIO, GENILSON F
Address: 4433 SW 14 AVE
City-St-Zip: CAPE CORAL, FL 33914

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LOPES, ROBSON
Address: 3165 E. RIVERSIDE DR #4
City-St-Zip: CAPE CORAL, FL 33916

Title: VP (X) Change () Addition
Name: SOARES, NELIO
Address: 3165 E. RIVERSIDE DR #4
City-St-Zip: CAPE CORAL, FL 33916

Title: SEC (X) Change () Addition
Name: OZORIO, GENILSON F
Address: 3165 E. RIVERSIDE DR #4
City-St-Zip: CAPE CORAL, FL 33916

Title: DIR () Change (X) Addition
Name: GONCALVES, ORCILEI J
Address: 3165 E. RIVERSIDE DR #4
City-St-Zip: CAPE CORAL, FL 33916

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBSON LOPES

P

01/05/2007

Electronic Signature of Signing Officer or Director

Date