## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000034738

Entity Name: OSP TECH, INC

FILED Sep 15, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

425 S STATE RD 7 7070 NW 177 ST HOLLYWOOD, FL 33023 109

MIAMI, FL 33015

Current Mailing Address: New Mailing Address:

425 S STATE RD 7 PO BOX 226864 HOLLYWOOD, FL 33023 PIAM, FL 33222

FEI Number: 20-8653994 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

PENA, PRAXEDES
17610 NW 73 AVE
103
MIAMI LAKES, FL 33015 US

PENA, PRAXEDES
7070 NW 177 ST
109
MIAMI, FL 33015 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: 09/15/2008

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition

 Name:
 PENA, PRAXEDES
 Name:
 PENA, PRAXEDES

 Address:
 425 S STATE RD 7
 Address:
 PO BOX 226864

 City-St-Zip:
 HOLLYWOOD, FL 33023 US
 City-St-Zip:
 MIAMI, FL 33222 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: PRAXEDES PENA P 09/15/2008