

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000065511

FILED  
Apr 16, 2009  
Secretary of State

Entity Name: ORION OIL AND GAS CONSULTING CORP.

## Current Principal Place of Business:

5950 LAKEHURST DR  
240  
ORLANDO, FL 32819

## New Principal Place of Business:

## Current Mailing Address:

5950 LAKEHURST DR  
240  
ORLANDO, FL 32819

## New Mailing Address:

FEI Number: 26-0282287      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RIVERA, SEVERINA C  
6220 S. ORANGE BLOSSOM TRL  
603  
ORLANDO, FL 32809 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: OLIVA, THELMA MARIA S  
Address: RUA CAROLINA SANTOS 42 APT 301  
City-St-Zip: RIO DE JANEIRO, RJ 20720-310 BR

Title: DT ( ) Delete  
Name: SILVA, ROBERTO O  
Address: RUA CAROLINA SANTOS 42 APT 301  
City-St-Zip: RIO DE JANEIRO, RJ 20720-310 BR

Title: DS ( ) Delete  
Name: OLIVA, CLAUDIA R  
Address: RUA CAROLINA SANTOS 42 APT 301  
City-St-Zip: RIO DE JANEIRO, RJ 20720-310 BR

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DT (X) Change ( ) Addition  
Name: SILVA, ROBERTO O  
Address: 6043 CARRIER DR APT 1008  
City-St-Zip: ORLANDO, FL 32819 US

Title: DS (X) Change ( ) Addition  
Name: OLIVA, CLAUDIA R  
Address: 6043 CARRIER DR APT 1008  
City-St-Zip: ORLANDO, FL 32819 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: ROBERTO OLIVEIRA SILVA

DT

04/16/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date