2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000077545

Entity Name: O CAMELOT INC.

FILED Apr 11, 2012 Secretary of State

| Current Principal Place of Business: | | | | New Principal Place of Business: | | |
|---|---|--------------------|-----------------|------------------------------------|--------------------------------------|--|
| | STONECROP INT LUCIE, FL | | | | | |
| Current Mailing Address: | | | | New Mailing Address: | | |
| | STONECROP INT LUCIE, FL | | | | | |
| FEI Number | : 26-3231975 | FEI Number App | olied For () | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: Name and Address of New Registered Agent: | | | | | | |
| 2152 SE S | D, DEVINDRA STONECROP INT LUCIE, FL | | | | | |
| | e named entity e of Florida. | submits this state | ement for the p | ourpose of changing its registered | office or registered agent, or both, | |
| SIGNATU | RE: | | | | | |
| | Electro | nic Signature of F | Registered Age | ent | Date | |
| OFFICER | S AND DIREC | CTORS: | | | | |
| Title: Name: | P PERSAUD, DE | VINDRA | | | | |

Address: 2152 SE STONECROP STREET
City-St-Zip: PORT SAINT LUCIE, FL 34984

Title: \

Name: PERSAUD, RADHICA L

Address: 2152 SE STONECROP STREET City-St-Zip: PORT SAINT LUCIE, FL 34984

I hereby 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 all other like empowered.

SIGNATURE: DEVINDRA PERSAUD P 04/11/2012