

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000098784

Entity Name: ORIGINAL DEZING INC.

FILED
Feb 19, 2009
Secretary of State

Current Principal Place of Business:

191 SE 20TH AVE.
PH 620
DEERFIELD BEACH, FL 33441 US

New Principal Place of Business:

Current Mailing Address:

191 SE 20TH AVE.
PH 620
DEERFIELD BEACH, FL 33441 US

New Mailing Address:

FEI Number: 26-3661322 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAGAN, YAIR
1200 S. ROGERS CIRCLE
SUITE 10
BOCA RATON, FL 33487 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: DIR () Delete
Name: KAGAN, YAIR
Address: 191 SE 20TH AVE., PH 620
City-St-Zip: DEERFIELD BEACH, FL 33441 US

Title: PRES (X) Delete
Name: KAGAN, YAIR
Address: 191 SE 20TH AVE., PH 620
City-St-Zip: DEERFIELD BEACH, FL 33441 US

Title: VP (X) Delete
Name: KAGAN, YAIR
Address: 191 SE 20TH AVE., PH 620
City-St-Zip: DEERFIELD BEACH, FL 33441 US

Title: SEC (X) Delete
Name: KAGAN, YAIR
Address: 191 SE 20TH AVE., PH 620
City-St-Zip: DEERFIELD BEACH, FL 33441 US

Title: TREA (X) Delete
Name: KAGAN, YAIR
Address: 191 SE 20TH AVE., PH 620
City-St-Zip: DEERFIELD BEACH, FL 33441 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change () Addition
Name: KAGAN, YAIR
Address: 191 SE 20TH AVE., PH 620
City-St-Zip: DEERFIELD BEACH, FL 33441 US

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

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Name: _____
Address: _____
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Name: _____
Address: _____
City-St-Zip: _____

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

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: YAIR KAGAN

Electronic Signature of Signing Officer or Director

PDS

02/19/2009

Date