2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000102684

City-St-Zip: MIAMI, FL 33176

Entity Name: OSTUMA PARTNERS, INC.

FILED Jun 24, 2009 Secretary of State

Littly Nai	ine. OSTOWA	FARTNERO, INC.			
Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
6855 SW 81 ST, STE 210 MIAMI, FL 33143			6855 SW 81 ST, STE 210 MIAMI, FL 33143	STE 210	
Current Mailing Address:			New Mailing Address	New Mailing Address:	
6855 SW 81 ST, STE 210 MIAMI, FL 33143			6855 SW 81 ST, STE 210 210 MIAMI, FL 33143		
FEI Number:	: 26-3844508	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
The above	94TH ST 33176 US named entitys	submits this statement for the p	urpose of changing its registered	l office or registered agent, or both,	
in the State	e of Florida.				
SIGNATU		ic Signature of Registered Age	nt.	 Date	
Election Car	ce with s. 607.19 npaign Financing	3(2)(b), F.S., the corporation did no g Trust Fund Contribution().	t receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () ROBELO, JOR 9001 SW 94TH MIAMI, FL 331	ST, UNIT 108	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	VP () ROBELO, LUCI 9001 SW 94TH MIAMI, FL 331	ST, UNIT 108	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	D () ROBELO, MELI		Title: Name: Address:	() Change () Addition	

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.

City-St-Zip:

SIGNATURE: LUCIA S ROBELO VP 06/24/2009