FROM :SANTOS LOPEZ FAX NO. :305567 0873

FILED
May 24, 2002 8:00 am
Secretary of State
03-31-2002 90370 011 ***150.00

O Y RECEIVED

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000015296

1. Entity Name
OSANEM CORPORATION

Principal Place of Business	Mailing Address
14620 S.W. 148TH ST. CIR. MIAMI FL 33196	14620 S.W. 148TH ST. CIR. MIAMI FL 33196-2344

UBR FOR YEAR 2002 HAS NOT BEEN RECEIVED.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
14904 S.W. 139th. STREET	14904 S.W. 139th STREET
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: MIAMI, FLORIDA	City & State: MIAMI, FLORIDA
Zip: 33186 / Country: U.S.A.	Zip: 33186 / Country: U.S.A.

4. FEI Number 65-0397755 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
ERNAND, OSCAR A
14620 S.W. 148TH ST. CIR.
MIAMI FL 33196

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

8. 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 [signature] 3/17/02

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PTD ERNAND, OSCAR A 14620 S.W. 148TH ST. CIR. MIAMI FL ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

X [signature] 4.28.02 (OSCAR ERNAND)