## 2007 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

## FILED: Apr 23, 2007 08:00 All Secretary of State DOCUMENT # P93000016280 1. Entity Name O & H INTERNATIONAL, INC. Principal Place of Business Mailing Address 2238 NW 7TH ST MIAMI FL 33125 2238 NW 7TH ST MIAMI FL 33125 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suito, Apt #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State City & State 4. FEI Number Applied For 65-0392276 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name RODRIGUEZ, NIURKA M Street Address (P.O. Box Number is Not Acceptable) 320 N.W. 123 AVE MIAMI FL 33182 City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title r applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE TITLE Change ☐ Addition ☐ Defete RODRIGUEZ, NIURKA M NAME NAME 320 N.W. 123 AVE STREET ADDRESS STREET ADDRESS MIAMI FL 33182 CITY-ST-ZIP CITY - ST - ZIP U00000726628 □ Change D 05/04/07-80015-017 150.00 D ☐ Delete THILE TIFLE Addition HENRY TEJEDA NAME NAME 320 NW 123 AVE STREET ADDRESS STREET ADDRESS MIAMI FL 33182 CITY-ST-ZIP CITY-SI-ZIP TITLE Delete TITLE ☐ Change ■ Addition OMAR RODRIGUEZ NAME . NAME 320 NW 123 AVE STREET ADDRESS STREET ADDRESS MIAMI FL 33182 CITY-ST-ZIP CITY - ST - ZIP THIF Detete TITLE ☐ Change Addition MAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP Delete ■ Addition THILE TITLE Change NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change TOLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119. 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 receiper or dustos empowered to execute the report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: \_

SIGNATURE AND TYPED OR PRINTED NAME OF

4-20-07 305-634-41 co.