

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAY -1 AM 8: 33

DOCUMENT # P93000041484 (5)

1. Corporation Name

OSINA, CORPORATION

DO NOT WRITE IN THIS SPACE

Principal Place of Business

23524 SENECA RIDGE COURT
SUITE 2
CHRISTMAS FL 32709
US

Mailing Address

23524 SENECA RIDGE COURT
SUITE 2
CHRISTMAS FL 32709
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip

30 Country

3. Date Incorporated or Qualified

06/11/1993

3a. Date of Last Report

06/27/1994

4. FEI Number

59-3188268

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032.

Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

MCCLAIN, JAMES
3155 SOUTH STREET
TITUSVILLE FL 32780

10. Name and Address of New Registered Agent

81 Name

Kevin P. Markey, P.A.

82 Street Address (P.O. Box Number is Not Acceptable)

15 E. Merritt Island Causeway

83

Suite 307

84 City

Merritt Island

85 FL

86 Zip Code

32952

11. Pursuant to the provisions of Sections 607.0502 and 607.0508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

[Signature]

(NOTE: Registered Agent signature required when registering)

DATE

5/24/95

12. OFFICERS AND DIRECTORS

PD
NAME BARRY, LUISA
STREET ADDRESS 2585 SOUTH COUTENAY PARKWAY
CITY ST ZIP MERRITT ISLAND FL 32952

TD
NAME BARRY, LUISA
STREET ADDRESS 23524 SENECA RIDGE COURT
CITY ST ZIP CHRISTMAS FL

VD
NAME BOUL, MICHAEL
STREET ADDRESS 2609 BAYWOOD DRIVE
CITY ST ZIP TITUSVILLE FL 32780

SD
NAME MCCLAIN, JAMES
STREET ADDRESS 3155 SOUTH STREET
CITY ST ZIP TITUSVILLE FL 32780

NAME
STREET ADDRESS
CITY ST ZIP

NAME
STREET ADDRESS
CITY ST ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY ST ZIP

☐ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY ST ZIP

☒ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY ST ZIP

☒ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY ST ZIP

☒ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY ST ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY ST ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Luisa Barry

Luisa Barry

2/28/95 (85) 724-3994

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR