

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P93000046584

**FILED**  
**Aug 05, 2012**  
**Secretary of State**

**Entity Name:** THE OSHODI FOUNDATION, P.A.

**Current Principal Place of Business:**

1251 NW 36 STREET  
SUITE 3  
MIAMI, FL 33142

**New Principal Place of Business:**

**Current Mailing Address:**

P.O.BOX 551874  
MIAMI GARDENS, FL 33056

**New Mailing Address:**

**FEI Number:** 65-0420803

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

OSHODI, JOHN E  
1251 NW 36 STREET  
SUITE 3  
MIAMI, FL 33142 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

**OFFICERS AND DIRECTORS:**

Title: DR.  
Name: OSHODI, JOHN E  
Address: 1251 NW 36 STREET  
City-St-Zip: MIAMI, FL 33142

Title: V  
Name: LIGHTBOURN, MARILYN  
Address: 1251 NW 36 STREET  
City-St-Zip: MIAMI, FL 33142

I hereby 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 all other like empowered.

SIGNATURE: JOHN OSHODI

DR

08/05/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date