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May 12 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # **P96000058344 (8)**

1. Corporation Name
OZURIC INTERNATIONAL, INC.

Principal Place of Business	Mailing Address
5062 WEST COLONIAL. SUITE 231 ORLANDO FL 32808	5062 WEST COLONIAL. SUITE 231 ORLANDO FL 32808-7641

3. Date Incorporated or Qualified: 07/09/1996
3a. Date of Last Report:

2. Principal Place of Business	2a. Mailing Address
21 2733 N. Hiawassee Rd	26 2733 N. Hiawassee Rd
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 Orlando Florida	City & State 28 Orlando Florida
Zip 24 32808 Country 25 Orange	Zip 29 32808 Country 30 Orange

4. FEI Number: 59-3390027 ☐ 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

OZUZO, ERIC BOBBY
5062 WEST COLONIAL, SUITE 231
ORLANDO FL 32808

10. Name and Address of New Registered Agent

81 Name: Sandrina T. Ozuzu
82 Street Address (P.O. Box Number is Not Acceptable): 2733 N. Hiawassee Road
83
84 City: Orlando **FL** 85 Zip Code: 32808

11. Pursuant to the provisions of Sections 607.0502 [illegible] 607.1508, 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: Sandrina T. Alexandre Sandrina T. Alexandre 4.30.97
(Signature, typed or printed name of registered agent and title if applicable.) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	☒ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	OZUZU, ERIC B		1.2 NAME	
STREET ADDRESS	3602 RANCHWOOD ROAD		1.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32808		1.4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	2.1 TITLE	☒ Change ☐ Addition
NAME	ALEXANDRE, SANDRINA		2.2 NAME	Sandrina T. Alexandre
STREET ADDRESS	3602 RANCHWOOD ROAD		2.3 STREET ADDRESS	5449 Pine Chase Dr. #5
CITY-ST-ZIP	ORLANDO FL 32808		2.4 CITY-ST-ZIP	Orlando Florida 32808
TITLE		☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

CR2E034 (9/96)

14. I do 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 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: Sandrina T. Alexandre Sandrina T. Alexandre 4.30.97 (407) 291-3008
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #