

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S43026

FILED  
Jan 23, 2009  
Secretary of State

Entity Name: OXYGEN ZONE SURFWEAR, INC.

**Current Principal Place of Business:**

10900 FRONT BEACH RD  
PANAMA CITY BEACH, FL 32407

**New Principal Place of Business:**

**Current Mailing Address:**

10900 FRONT BEACH RD  
PANAMA CITY BEACH, FL 32407

**New Mailing Address:**

FEI Number: 59-3064176

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SAFDIE, YORAM  
379 MAHOO RD  
PANAMA CITY, FL 32411 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: PEREZ, SAMARYAHOU  
Address: 111 W. WESLIE LANE  
City-St-Zip: PANAMA CITY BEACH, FL 32407

Title: VP ( ) Delete  
Name: SAFDIE, YORAM  
Address: P O BOX 28268  
City-St-Zip: PANAMA CITY, FL 32411

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: YORAM SAFDIE

VP

01/23/2009

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

\_\_\_\_\_  
Date