

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000050309

**Entity Name:** OPTIMUM SYSTEMS GROUP, INC.

**Current Principal Place of Business:**

353 SHORE DRIVE E  
OLDSMAR, FL 34677

**Current Mailing Address:**

PO BOX 1441  
OLDSMAR, FL 34677-1441 US

**FEI Number:** 59-3651413

**Certificate of Status Desired:** No

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

WIECKOWSKI, ZOFIA  
353 SHORE DRIVE EAST  
OLDSMAR, FL 34677-3915 US

*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

**Officer/Director Detail :**

Title            PRESIDENT, TREASURER  
Name            WIECKOWSKI, ZOFIA  
Address        PO BOX 1441  
City-State-Zip:   OLDSMAR FL 34677-1441

Title            VP, SECRETARY  
Name            WIECKOWSKI, WACLAW  
Address        PO BOX 1441  
City-State-Zip:   OLDSMAR FL 34677-1441

*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:** ZOFIA WIECKOWSKI

**PRESIDENT**

**04/22/2014**

Electronic Signature of Signing Officer/Director Detail

Date