


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 19, 2007 8:00 am
Secretary of State

02-19-2007 90059 024 ***150.00

DOCUMENT # F98000004814

1. Entity Name
OSTLER INTERNATIONAL, INC.



Principal Place of Business Mailing Address
3170 SOUTH 900 WEST **3170 SOUTH 900 WEST**
SALT LAKE CITY, UT 84119 **SALT LAKE CITY, UT 84119**

40020400



2. Principal Place of Business - No P.O. Box # 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

01092007 Chg-P CR2E034 (12/06)

City & State City & State

4. FEI Number Applied For
87-0453814 Not Applicable

Zip Country Zip Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

7. Name and Address of New Registered Agent

Name

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

City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD Delete
NAME **OSTLER, VYRON**
STREET ADDRESS **967 E MOYLE CIR**
CITY-ST-ZIP **ALPINE, UT 84004**

TITLE Change Addition
NAME **SECRETARY/TREASURER**
STREET ADDRESS **NOT A DIRECTOR**
CITY-ST-ZIP

TITLE STD Delete
NAME **OSTLER, DONNELL**
STREET ADDRESS **9805 ASHBY LN**
CITY-ST-ZIP **HIGHLAND, UT 84003**

TITLE Change Addition
NAME **SECRETARY/TREASURER**
STREET ADDRESS **NOT A DIRECTOR**
CITY-ST-ZIP

TITLE VP Delete
NAME **OSTER, RALPH**
STREET ADDRESS **44 S VILLAGE CT**
CITY-ST-ZIP **ALPINE, UT 84004**

TITLE Change Addition
NAME **SECRETARY/TREASURER**
STREET ADDRESS **NOT A DIRECTOR**
CITY-ST-ZIP

TITLE VP Delete
NAME **SORENSEN, JAY**
STREET ADDRESS **8708 DEEP CREEK CIR**
CITY-ST-ZIP **WEST JORDAN, UT 84088**

TITLE Change Addition
NAME **SECRETARY/TREASURER**
STREET ADDRESS **NOT A DIRECTOR**
CITY-ST-ZIP

TITLE D Delete
NAME **OSTLER, DALE**
STREET ADDRESS **900 W 3170 S**
CITY-ST-ZIP **SALT LAKE CITY, UT 84119**

TITLE Change Addition
NAME **SECRETARY/TREASURER**
STREET ADDRESS **NOT A DIRECTOR**
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Vyron Ostler* 2/13/07 _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #