

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000073444

FILED
May 01, 2004
Secretary of State

Entity Name: AFRICAN GROWTH AND OPPORTUNITIES INC.

Current Principal Place of Business:

P. O. BOX 50163
JACKSONVILLE, FL 32240

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 50163
JACKSONVILLE, FL 32240

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRINKS, LUCY B
446 6TH AVENUE SOUTH
JACKSONVILLE BEACH, FL 32250 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: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES () Change (X) Addition
Name: FRINKS, BRENDA
Address: PO B 50163
City-St-Zip: JACKSONVILLE BEACH, FL 32240-016 US

Title: VP () Change (X) Addition
Name: NYAGAH, SIMON
Address: 10960 ENIWETOK DRIVE
City-St-Zip: JACKSONVILLE, FL 32246 US

Title: SEC () Change (X) Addition
Name: FRINKS, JAVAN
Address: POB 50163
City-St-Zip: JACKSONVILLE BEACH, FL 32240-016 US

Title: TREA () Change (X) Addition
Name: MASON, CHARLES
Address: 3770TELEDO ROAD # 28
City-St-Zip: JACKSONVILLE, FL 32217 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BRENDA FRINKS

PRES

05/01/2004

Electronic Signature of Signing Officer or Director

Date