

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

**FILED
Jan 20, 2006 8:00 am
Secretary of State**

01-20-2006 90032 010 ***150.00

DOCUMENT # F97000004610

1. Entity Name
O & G ENTERPRISES, INC.



Principal Place of Business
18651 MISTY LAKE DR.
JUPITER, FL 33458

Mailing Address
18651 MISTY LAKE DR.
JUPITER, FL 33458



| | |
|--|---|
| 2. Principal Place of Business 2866 Tennis Club Drive Suite, Apt. #, etc. Apt # 503 | 3. Mailing Address 2866 Tennis Club Drive Suite, Apt. #, etc. Apt# 503 |
| City & State West Palm Beach, FL | City & State West Palm Beach, FL |
| Zip 33417 | Country USA |

01102006 Chg-P CR2E034 (11/05)
4. FEI Number
51-0344314
Applied For
Not Applicable

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

7. Name and Address of New Registered Agent

LISEE, CHRISTINE E
18651 MISTY LAKE DR.
JUPITER, FL 33458

Name
Kevin J. Hanna
Street Address (P.O. Box Number is Not Acceptable)
2866 Tennis Club Drive
Apt#503
City
West Palm Beach FL Zip Code
33417

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 *Kevin J. Hanna*

Signature, typed or printed name of registered agent and title if applicable.

1/11/06

DATE

(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE VDS
NAME LISEE, CHRISTINE E
STREET ADDRESS 18651 MISTY LAKE DR.
CITY-ST-ZIP JUPITER, FL 33458

Delete

TITLE PDT
NAME HANNA, KEVIN J
STREET ADDRESS 18651 MISTY LAKE DR.
CITY-ST-ZIP JUPITER, FL 33458

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE PDT
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

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: *Kevin J. Hanna*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/11/06 561-905-7800
Date Daytime Phone #