


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2008 8:00 am
Secretary of State

01-29-2008 90015 044 ***150.00

DOCUMENT # F97000004610	
1. Entity Name O & G ENTERPRISES, INC.	

Principal Place of Business 2866 TENNIS CLUB DR. APT. #503 WEST PALM BEACH, FL 33417	Mailing Address 2866 TENNIS CLUB DR. APT. #503 WEST PALM BEACH, FL 33417
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40012436

2. Principal Place of Business - No P.O. Box # 2896 TENNIS CLUB DR. Suite, Apt. #, etc. APT # 407 City & State WEST PALM BEACH, FL Zip 33417 Country	3. Mailing Address 2896 TENNIS CLUB DR. Suite, Apt. #, etc. APT # 407 City & State WEST PALM BEACH, FL Zip 33417 Country
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01242008 Chg-P CR2E034 (12/06)

4. FEI Number 51-0344314	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent HANNA, KEVIN J. 2896 TENNIS CLUB DR APT. #407 WEST PALM BEACH, FL 33417	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
VTDS HANNA, KEVIN J 2896 TENNIS CLUB DR. APT #407 WEST PALM BEACH, FL 33417 <input type="checkbox"/> Delete	PVTDS <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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 KEVIN J. HANNA 1/25/08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR