

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N02000008254

FILED
Oct 22, 2007
Secretary of State

Entity Name: OPPORTUNITIES ABOUND IN CAREERS, INCORPORATED

Current Principal Place of Business:

6152 9TH AVE CIR NE
BRADENTON, FL 34212

New Principal Place of Business:

Current Mailing Address:

6152 9TH AVE CIR NE
BRADENTON, FL 34212

New Mailing Address:

9223 54TH CT E
PARRISH, FL 34219

FEI Number: 11-3655064 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

DESUE, WENSTON B
3175 CASTLETON DRIVE, UNIT D
BRADENTON, FL 34208 US

Name and Address of New Registered Agent:

DESUE, WENSTON B
9223 54TH CT E
PARRISH, FL 34219 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: WENSTON B. DESUE

10/22/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JONES, MARIANI
Address: 1609 9TH AVE E
City-St-Zip: BRADENTON, FL 34208

Title: VP () Delete
Name: LUCAS, MARK E
Address: 912 DELANY CIR.
City-St-Zip: BRANDON, FL 33511

Title: S () Delete
Name: CARTER, PAULA S
Address: 1250 102ND AVE N
City-St-Zip: JACKSONVILLE, FL 32208

Title: D () Delete
Name: YOUNG, CHE' ESQ
Address: 152 CRESTMONT DR
City-St-Zip: MACON, GA 31206

Title: D () Delete
Name: DEMPS, JULIUS DR., II
Address: 2442 WISPERING LAWN LN
City-St-Zip: JACKSONVILLE, FL 32145

Title: D () Delete
Name: SUGGS, STACI DR. DOS
Address: 8448 FINCH AVE. E.
City-St-Zip: JACKSONVILLE, FL 32219

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARK E. LUCAS

VP

10/22/2007

Electronic Signature of Signing Officer or Director

Date