

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004982

FILED
Mar 24, 2008
Secretary of State

Entity Name: OPPORTUNITIES AND ENRICHMENT SERVICES, INC.

Current Principal Place of Business:

19700 S.W. 103RD COURT #104
MIAMI, FL 33157

New Principal Place of Business:

Current Mailing Address:

19700 S.W. 103RD COURT #104
MIAMI, FL 33157

New Mailing Address:

1521 DUNES STREET
ORANGEBURG, SC 29115

FEI Number: 65-0619118

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, LOIS W
19700 S.W. 103RD COURT #104
MIAMI, FL 33157 US

Name and Address of New Registered Agent:

BROWN, LOIS W
1521 DUNES STREET
ORANGEBURG, FL 29115 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:

03/24/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: WOODSON, BRENDA J
Address: 18010 S.W. 136TH COURT
City-St-Zip: MIAMI, FL 33177

Title: D () Delete
Name: MCDONALD, AMY
Address: 10875SW112TH AVE
City-St-Zip: MIAMI, FL 33186

Title: D () Delete
Name: WONSIK, PETRA L
Address: 8700SW133 AVE #306-A
City-St-Zip: MIAMI, FL 33183

Title: T () Delete
Name: DEKLE, MARILYN
Address: 20310NW 33RD COURT
City-St-Zip: MIAMI, FL 33056

Title: PD () Delete
Name: BROWN, LOIS W
Address: 19700 S.W. 103RD COURT #104
City-St-Zip: MIAMI, FL 33157

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:

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: LOIS W. BROWN

RA

03/24/2008

Electronic Signature of Signing Officer or Director

Date