2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 05, 2008 08:00 AN Secretary of State

DOCUMENT # P02000113577 1. Entity Name OPAH CORPORATION				Secretary of Star		
Principal Place	e of Business	Mailing Address]		
13331 GULF MADEIRA BE	BLVD ACH, FL 33708	13331 GULF BLVD: MADEIRA BEACH, FL 33708		hrpdu .		
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			ÁF	02132008 No Chg-P CR2E034 (11/05)		
DO NOT WRITE IN THIS SPACE			LE 🗼	4. FEI Numbe		Applied For
				52-238	of Status Desired	Not Applicable 8.75 Additional e Required
6573,13536 19999	6. Name and Address of Current Re	gistered Agent				
YIANNIOS, KONSTANTINA 13331 GULF BLVD. MADEIRA BEACH, FL 33708				31.3	NOT WRITE HIS SPACE	
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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when uninstating) DATE						
FIL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00			.00 May Be ded to Fees	U00000947590	produce a product product to
10.	OFFICERS AND D	RECTORS	,		<u> </u>	
NAME STREET ADDRESS CITY-ST-ZIP	DPT YIANNIOS, KONSTANTINA 13331 GULF BLVD. MADEIRA BEACH, FL 33708					
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP					NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN 7	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						

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:

SIGNATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

4/30/08

Daytime Phone #