FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Mailing Address

1421 ROSELAND AVE.

2a. Mailing Address

SEBRING FL 33870-4746

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

2. Principal Place of Business

1421 ROSELAND AVE.

SEBRING FL 33970



appears in Block 12 or Block 13 if changed, or on an attachment with an address

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000083468 (6)

ALPHA AND OMEGA LOCKSMITH INC.

65-0541871 26 Not Applicable 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country Zio Country 8. This corporation has liability for intangible tax under s. 199:032, Yes No Florida Statutes 30 25 29 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name OSBORNE, OTIS O. 1421 ROSELAND AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) SEBRING FL 33870 83 Zip Code 84 City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fiorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature: typed or printed name of registered agent and title II applicable. (NOTE Registered Agent a gnature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Change Addition DELETE 1.1 TITLE TITLE OSBORNE, OTIS O NAME 12 NAME 1421 ROSELAND AVE. 1.3 STREET ADDRESS STREET ADDRESS SEBRING FL 33870 14 City-St-7iP CITY - ST - 7(P Addition Change DELETE THEF 21 TITLE OSBORNE, BRENDA A NAME 22 NAME 1421 ROSELAND AVE. 2.3 STREET ADDRESS STREET ADDRESS SEBRING FL 33870 2.4 CITY-ST-ZIP CITY - ST- 7IP Change DELETE Addition 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CHTY - ST-- ZIP DELETE Change Addition 4.1 TITLE THLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST ZIP ___ Addition DELETE ☐ Change 5.1 TITLE TIME NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-Z-P 5.4 DITY - ST- ZIP Change Addition DELETE 61 TITLE T-TLE 62 NAME NAME 63 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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

FILED
May 13 1997 8:00am
Secretary of State

3a. Date of Last Report

Applied For

05/01/1996

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3. Date Incorporated or Qualified

May 1, 1997

11/15/1994

4. FEI Number