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

Mailing Address

POST OFFICE BOX 6255 LAKELAND FL 33807-6255

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

5224 YATES RD

LAKELAND FL 33811



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

FLORIDA DEPARTMENT OF STATE

FILED

Feb 20 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000026546 (8)

O & G BOOKKEEPING SERVICES, INC.

						3. Date Incorporated or Qualified 3a. Date of Last Report 03/30/1995 05/01/1996			
2. Principal P	ace of Business	2a. Mailing Addi	2a. Mailing Address			4. FEI Number Applied For			
21		26	26			59-3327299 Not Applica	ble		
Suite, Apt	# etc	Suite, Apt. #	etc.			5. Certificate of Status Desired \$8.75 Additional			
22		27				5. Certificate of Status Desired Fee Required			
City & State	9	City & State				6. Election Campaign Financing \$5.00 May Be			
23		28				Trust Fund Contribution Added to Fees			
Zip	Country	Zip	C	ountry		8. This corporation has tiability for intangible tax under s. 199.032	,		
24	25 29 30			Florida Statutes Yes No					
Name and Address of Current Registered Agent				II.		10. Name and Address of New Registered Agent			
CARTER, OPAL S				81 Name					
5224 YATES ROAD				82 Street Address (P.O. Box Number is Not Acceptable)					
LAKELAND FL 33811					01100111	Tidaloo (1.0. Day talinos) is tidaloo to t			
				83					
				84	City	85 Zip Code			
				64	City	FL 18 2 P COUR			
11. Pursuant	to the provisions of Sections 607 0	502 and 607 1508, Flori	da Statutes, the	above	e-named o	corporation submits this statement for the purpose of changing its register	ed		
othee or r	egistered agent, or both, in the Stamilar with, and accept the ob-	ate of Florida. Such char	nge was authoria	zed by	r the corp	rporation's board of directors. I hereby accept the appointment as registere	d		
agentia	m rammar with, and accept the ob-	rganons of, Section 607	,0505, Fibrida S	lalules	.				
SIGNATURE	Signature, type for panied name of egysteed	anent and tale if analicable	INOTE Registe	ered Age	int signature i	re required when reinstating) DATE			
12.		AND DIRECTORS	I 1:	<u>-</u>		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
Tall F	PD		DELETE 1.1		T	Change Addi	tion		
NAME	CARTER, OPAL S	=		2 NAME					
STREET ALORESS	FAMILYATED DO				ADDRESS				
1	LAKELAND FL 33811		1	4 CITY-S	l l				
CITY ST Z#	D			TITLE	11 - ZIF	Change Addi	tion		
1	SMITH, REGINA O			2 NAME	1	1			
NAME	5224 YATES RD.				*PDDGCCC				
STREET AFIORESS	LAKELAND FL 33811				ADDRESS				
City St-Zi2	CARECAID I C 33011	Пп		4 CITY-5	51-ZIP	Change Add	ition		
litte I	L DELETE			3 1 TITLE			,,,,,,,		
NAME				3.2 NAME 3.3 STREET ADORESS			ļ		
STREET ADDRESS							i		
CHY - ST - 76"				4. CITY-S	S1-2IP	Change Add	itino		
TIFLE			i i	1 TITLE		Charige Add	COLL		
NAME			1	2 NAME					
STREET ADDRESS +					ADDRESS				
CITY ST ZIP				4 CITY - S	ST-ZIP		itie-		
THEF			ELÉTE 5.	1 TATLE	1	Change Add	щоп		
NAME:			5.3	2 NAME]				
STREET ADDISESS			5.	3 STREET	ADDRESS				
City 51 7iP				4 CITY - S	T-ZIP		Cat a		
TITLE		() C	ELETE 6	1 TITLE		Change Add	ition		
NAME			6.	2 NAME	ļ				
STREET ADDIRESS			6.	3 STREET	ADDRESS				
City+ST 2IP				4 CITY - 9					
4.0 1.4. 1.4.	by certify that the information supp	blied with this filing does	not qualify for t	he exe	emption st	stated in Section 119.07(3)(i), Florida Statutes. I further certify that the did that my signature shall have the same legal effect as if made under cath;	that		
I am an d	on indicated on this annual report officer or director of the corporation	or the receiver or trust	report is true an ee empowered t	lo exec	urate and cute this r	report as required by Chapter 607, Florida Statutes; and that my name	in leaf		