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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000041805

O & D HOLDINGS, INC.

Principal Place of Bus	iness	Mail	Mailing Address					( 1881) 68 (Bill) Bill) SBIG BEIL GENT BEIL GEST (1881) GOTT (1881)			
20335 BISCAYNE BLVD	NORTH 35 TERRACE										
NORTH MIAMI BEACH FL 33180			HOLLYWOOD FL 33021					DO NOT WRITE IN THIS SPACE			
								3. Date Incorporated or Qualifer	<u> </u>		
								05/23/1995			
2. Principal Place of Business 2a. Mailing Address					<del></del>			4. FEI Number	~		applied For
21		26						65-0592858	_		lot Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.					5. Certificate of Status Desired		\$8.75	Additional Required —
City & State	<del></del>		City & State					6. Election Campaign Financing		\$5.00	May Be
23		28	Ony a orang					Trust Fund Contribution			to Fees
Zip	Country		Zip	Co	untry	,		8. This corporation owes the cu	rent vear Int	angible	
24	25	29	r	30	·			Personal Property Tax.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Yes	□No
9. Name and Address of Current Registered Agent								10. Name and Address of New Registered Agent			
					81	Na	ne				
BILLERA, JOHN F 3002 N 35TH TER HOLLYWOOD FL 33021					00	82 Street Addres		ss (P.O. Box Number is Not Accep	table)		
					82			iss (P.O. Box Number is Not Accep	(able)		
					83			<del></del>			
						<u>L</u> _					
					84	City	/		FL	85 Zip	Code
office or registere	rovisions of Sections 607.0502 of agent, or both, in the State of ar with, and accept the obligation	Florida	ı. Such change was a	uthorize	d by	' the c	ned corpo orporation	ration submits this statement for the n's board of directors. I hereby acc	e purpose of ept the appoi	changing i ntment as i	ts registered registered
SIGNATURE	typed or printed name of registered agent a	and tale if	applicable (NOTE	Penistere	d Aner	ht signs	hure required	when reinstating)	DATE		<del></del>
12.	OFFICERS AND			13.		- signe		ADDITIONS/CHANGES TO O	FFICERS AN	D DIRECT	ORS IN 12
TITLE V	OT TIOLITO ATO	<u> </u>	☐ DELETE	_	TILE		T .			☐ Change	
'	ra, Elizabeth			121	IAME						
	NORTH 35 TERRACE			1.3 9	TREE	T ADDR	ESS				
	YWOOD FL 33021			1,40	ITY-S	T-ZIP					
TITLE P	.11100011200021		☐ DELETE	2,1 1	ITLE					Change	e ☐ Addition
l '	RA. JOHN F			2.2	IAME						
	NORTH 35 TERRACE			2.3 5	TREE	TADDR	ESS				
	YWOOD FL 33021			2.4	CITY-S	ST-ZIP					
TITLE			☐ DELETE	3.11	ITLE					Change	Addition
NAME				3.27	IAME		1				
STREET ADDRESS				3.3 9	TREE	TADDR	ESS				
CITY-ST-ZIP				3.4.	CITY-S	ST-ZIP					
TITLE			☐ DELETE	4.11	ME					Change	Addition
NAME				4. 2	NAME						•

14. I 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 appears in officer or director of the corporation or Block 12 or Block 13 if changed, or ent with an address, with all other like empowered.

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

4.4 CITY\_ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-7IP

CITY-\$T-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

DELETE

DELETE

[ ] Change

☐ Change · ☐ Addition

☐ Addition

**FILED** 

Mar 04, 1999 8:00 am Secretary of State

03-04-1999 90179 025 \*\*\*150.00

CR2E034 (11/98)