

2005 FOR PROFIT CORPORATION ANNUAL REPORT


FILED
Apr 25, 2005 8:00 am
Secretary of State

04-25-2005 90277 003 ***150.00

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04052005 Chg-P CR2E034 (10/03)

DOCUMENT # P95000090026					
1. Entity Name OPPORTUNITY, INC.					
Principal Place of Business 6633 FOREST HILL BLVD. WEST PALM BEACH, FL 33408			Mailing Address 6633 FOREST HILL BLVD. WEST PALM BEACH, FL 33408		
2. Principal Place of Business 2090 Palm Beach Lakes Blvd. Suite, Apt. #, etc. Suite 501		3. Mailing Address 2090 Palm Beach Lakes Blvd. Suite, Apt. #, etc. Suite 501			
City & State West Palm Beach, FL		City & State West Palm Beach, FL		4. FEI Number 65-0622160	
Zip 33409		Country US		Applied For Not Applicable	
Zip 33409		Country US		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DOLCE, VINCENT M 6633 FOREST HILL BLVD. WEST PALM BEACH, FL 33408			7. Name and Address of New Registered Agent Name Catherine Z. Navarro Street Address (P.O. Box Number is Not Acceptable) 2090 Palm Beach Lakes Blvd. Suite 501 City West Palm Beach FL Zip Code 33409		
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 <u>Catherine Z. Navarro</u> <i>Catherine Z. Navarro</i> 04/18/05 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DOLCE, VINCENT M 6633 FOREST HILL BLVD. WEST PALM BEACH, FL 33408	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/S/D Navarro, Catherine Z. 2090 Palm Beach Lakes Blvd., Ste. 501 West Palm Beach, FL 33409	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD NAVARRO, CATHRINE Z 6633 FOREST HILL BLVD. WEST PALM BEACH, FL 33408	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. 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 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: Catherine Z. Navarro, Pres. <i>Catherine Z. Navarro</i>			04/18/05 (561) 478-2353		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date Daytime Phone #</small>		