

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

FILED
Jun 01, 1999 8:00 am
Secretary of State

06-01-1999 90039 034 ***150.00

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1. Corporation Name
OCOLA INCORPORATED

Principal Place of Business
2703 W. MORRISON AVENUE
TAMPA FL 33629

Mailing Address
2703 W. MORRISON AVENUE
TAMPA FL 33629

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/01/1996

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business
21 10706 Countryway Blvd.

2a. Mailing Address
26 10706 Countryway Blvd.

23 City & State
TAMPA FL

28 City & State
TAMPA FL

24 Zip 33635 Country Hillsborough

29 Zip 33635 Country Hillsborough

9. Name and Address of Current Registered Agent

O BRIAN, MICHAEL
2703 WEST MORRISON AVENUE
TAMPA FL 33629

10. Name and Address of New Registered Agent

81 Name O'Brien, Michael
82 Street Address (P.O. Box Number is Not Acceptable) 10706 Countryway Blvd.
83
84 City TAMPA FL 85 Zip Code 33626

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 Florida. 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 Michael O'Brien President
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> DELETE
P	O BRIEN, MICHAEL	2703 W.MORRISON AVENUE	TAMPA FL 33629	
VP	LEITHISER, LORAIN	2703 W.MORRISON AVENUE	TAMPA FL 33629	
S	O BRIEN, THOMAS	2703 W.MORRISON AVENUE	TAMPA FL 33629	
T	ADDISON, JOYCE	2703 W.MORRISON AVENUE	TAMPA FL 33629	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
P	O'Brien, Michael	10706 Countryway Blvd	TAMPA FL 33626	
VP	Leithiser, Lorraine	10706 Countryway Blvd.	TAMPA FL 33626	
S	O'Brien, Thomas	10706 Countryway Blvd.	TAMPA FL 33626	
T	Addison, Joyce	10706 Countryway Blvd.	TAMPA FL 33626	

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 Block 12 or Block 13 if changed, or on an attachment with an address with all other persons empowered.

SIGNATURE: Michael O'Brien
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)