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PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Jan 16 1998 8:00am Secretary of State

	ENGA FINANCIAL SERVICES,	INC.						
Principal Plac	e of Business	Mailing Address						ALIMA OPEL ABER
3203 EAST	HIGHWAY 96	3203 EAST HIGHWAY 98						
PANAMA CIT		PANAMA CITY FL 32401						
						WRITE IN THI	S SPACE	
				:	3. Date Incorporated or Qua	llified		ļ
0.0	No.	1 6- No. William Addition			02/10/1997			
	Place of Businoss BANVIEW AVENUE	26. Mailing Address 26. P.O. BOX 4	701		4. FEI Number 59-342600	(1)	r—-	pplied For
21 1809 Sulte, Apt.	- 	Suite, Apt. #, etc.	101		3-1-342000	<u> </u>		lot Applicable Additional
22	, 0.0.	27			Certificate of Status Desir	ed 🔲	7	Required
City & Stat	te	City & State			6. Election Campaign Finance	cina) May Be
23 PANA	MA CITY, FL	28 PANAMA CIT	Y, FL		Trust Fund Contribution			to Fees
Zip	Country	Zip	Country		8. This corporation owes or	has paid the o	urrent year In	langible
24 32409	5-1518 25 U.S.	29 32401-8701 3	o ús.]	Personal Property Tax du] No
	9. Name and Address of Current	Registered Agent			10. Name and Address of N	ew Registere	d Agent	
	Strenga, Bernard a II 203 East Highway 98		81 Name	Tir	MOTHY OSTRE	ENGA		1
· ·	82 Street	Addres	s (P.O. Box Number is Not Ac	ceptable)				
PA	ANAMA CITY FL 32401		83	92	9 LEE Cour	<u> </u>		
			83					
			84 City	CAL	LAWAY	F	L 85 Zip	Code 2404
11. Pursuant	to the provisions of Serions 607.0502 registered agont of Jolk, in the State of am familiar with, and accept the obligant	and 607.1508, Florida Statutes	the above-named	corpor	ation submits this statement for	r the purpose	of changing	its registered
agent. La	am family with, and accept the obligation	ons of, Section 607.0505, Florid	da Statules.	poratioi	is board of directors, i nereby	accept the ap	рролиным аз	s registered
1								
SIGNATURE						į	-6-98	
SIGNATURE	Signature, typed or printed name of registered agent (<i></i>	Registered Agent signature	required		DATE		
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO	DATE	ND DIRECTO	
12.	OFFICERS AND PD	<i></i>	13. 1.1 THE	PL	ADDITIONS/CHANGES TO	OFFICERS AI		RS IN 12
12. TITLE NAME	OFFICERS AND PD OSTRENGA, BERNARD A II	DIRECTORS	13. 1.3 THLE 1.2 NAME	PE	ADDITIONS/CHANGES TO	OFFICERS AI	ND DIRECTO	RS IN 12
12. TITLE NAME STREET ADDRESS	OFFICERS AND PD OSTRENGA, BERNARD A II 3203 EAST HIGHWAY 98	DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREFT ADDRESS	PE TIM 929	ADDITIONS/CHANGES TO D MOTHY OSTREA LEE COURT	DATE OFFICERS A	ND DIRECTO	RS IN 12
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND PD OSTRENGA, BERNARD A II 3203 EAST HIGHWAY 98 PANAMA CITY FL 32401	DIRECTORS DELETE	13. 1.1 TILE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	PE TIM 929 CAL	ADDITIONS/CHANGES TO D AOTHY OSTREA LEE COURT -LAWAY, FL 33	OFFICERS AI	ND DIRECTOI	L. Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AND PD OSTRENGA, BERNARD A II 3203 EAST HIGHWAY 98 PANAMA CITY FL 32401 VD	DIRECTORS	13. 1.1 THE 12 NAME 1.3 STREFT ADDRESS 1.4 CITY - ST - ZIP 2.1 THE	PE TIM 929 CAI	ADDITIONS/CHANGES TO AOTHY OSTREA LEE COURT LAWAY, FL 32	OFFICERS AI	ND DIRECTO	RS IN 12 Addition
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I hereby certify that the information supplied with this filling 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 amphair report is true and accurate and that my signature shall have the same legal effect as if made under eath, that I am an officer or director of the corporation or the receiver 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 attack pent with an address.

(850) 872-6908