

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

FILED
May 11 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000032238 (2)

1. Corporation Name

DEBITS & CREDITS GROUP, INC.

Principal Place of Business

6955 HANGING MOSS ROAD, SUITE 109
ORLANDO FL 32807

Mailing Address

6955 HANGING MOSS ROAD, SUITE 109
ORLANDO FL 32807

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/08/1997

4. FEI Number

59-3437694

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 or has paid the current year intangible
Personal Property Tax due June 30.

☒

Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 6955 Hanging Moss Rd.

Suite, Apt. #, etc.

22 Suite 104

City & State

23 Orlando, FL

Zip

24 32807

Country

25 Orange

26 6955 Hanging Moss Rd.

Suite, Apt. #, etc.

27 Suite 104

City & State

28 Orlando, FL

Zip

29 32807

Country

30 Orange

9. Name and Address of Current Registered Agent

HAMILLA, MIKE

6955 HANGING MOSS ROAD, SUITE 109
ORLANDO FL 32807

10. Name and Address of New Registered Agent

81 Name

Mike Hamilla

82 Street Address (P.O. Box Number is Not Acceptable)

6955 Hanging Moss Rd.
Suite 104

83

84 City

Orlando

FL

85 Zip Code

32807

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

Mike Hamilla

Mike Hamilla

4/30/98

Signature typed and printed name of registered agent and date if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

D
NAME
HAMILLA, MIKE
STREET ADDRESS
525 S. CONWAY ROAD #47
CITY-ST-ZIP
ORLANDO FL 32807

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

D, P, U, S, T
NAME
Hamilla, Mike
1.3 STREET ADDRESS
3132 Johnson Ct.
1.4 CITY-ST-ZIP
Orlando, FL 32822

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 the attachment with an address.

SIGNATURE:

Mike Hamilla Mike Hamilla (President) 4/30/98 (407) 678-8222

CR2E034 (10/97)