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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000040342 (2)

O'LEARY ENTERPRISES, INC.

Principal Place of Business

Mailing Address

FILED Mar 03 1998 8:00am Secretary of State

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1424 S HIGHLAND AVE CLEARWATER FL 34616		1424 S HIGHLAND AVE CLEARWATER FL 34616		DO NOT WRITE IN THIS	SPACE	
				 Date Incorporated or Qualified 05/06/1997 		
2 Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For	
	CLEVELAND ST		LAND ST.		Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	-NIVV		\$8.75 Additional	
22 <u>Su</u> City & State	iTE 249	27 SuiTE 2	249	5. Certificate of Status Desired	Fee Required	
23 CLEA	RWATER FL	28 CLEARWATE	ER FL.	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24 3375	Country Country Country	^{Zip} 33755 30	Country SA	8. This corporation owes or has paid the cu Personal Property Tax due June 30.	urrent year Intangible Yes No	
	9. Name and Address of Curren	t Registered Agent		10. Name and Address of New Registered	Agent	
REID. ANTHONY WALTER 81 Name						
142	4 S HIGHLAND AVE		82 Street Ad	dress (P.O. Box Number is Not Acceptable)		
CLEARWATER FL 34816						
1			83			
			84 City	FI	85 Zip Code	
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						
	Signature, typed or printed name of registered ager OFFICERS AND		legistered Agent tignature req		ID DIDECTORO (1) 40	
12.	PVST OF ICERS AND	DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AN	Change Addition	
NAME	REID, ANTHONY WALTER	C) otter	1,2 NAME		Strange Addition .	
STREET ADDRESS	1424 S HIGHLAND AVE		1.3 STREET ADDRESS			
CITY-ST-ZIP	CLEARWATER FL 34616		1.4 CFTY-ST-ZIP			
TITLE	D	DELETE	2.1 TITLE		☐ Change ☐ Addition	
NAME	REID, ANTHONY WALTER		2.2 NAME			
STREET ADDRESS	1424 S HIGHLAND AVE		2.3 STREET ADDRESS			
CITY-ST-ZIP	CLEARWATER FL 34816		2 4 CITY-ST-ZIP			
TITLE		DELETE	3.1 TITLE		☐ Change ☐ Addition	
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZiP			3.4. CITY-ST-ZIP			
TITLE		DELETE	4.1 TITLE		Change Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP		Decement of the second	4.4 OITY-ST-ZIP		[] A + + + + + + + + + + + + + + + + + +	
TITLE		☐ DELETE	5.1 TITLE		Change Addition	
NAME			5.2 NAME		j	
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP		DELETE	5.4 CITY - ST - ZIP			
TITLE		↑ DETEIE	6.1 TITLE	7000024464 -03/04/98010110	THE COURSE	
NAME CTOSET LIDODGOO			62 NAME	-03/04/98010110	ן השע 🗈	
STREET ADDRESS			6.3 STREET ADDRESS	***150.00	\3·9	
CITY-ST-ZIP		J	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 an attachment with an address.

SIGNATURE: Chief Walter Let ANTHONY WOLTER RETO 2/1/98 (8/3)46/1285