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 # P97000043081 (3)

COC CONSULTING INC

FILED Jan 30 1998 8:00am Secretary of State

OZO CONSULTING, INC.				
Principal Place of Business	Mailing Address		- I FORTIONE RED INIA ENDEL NOVIA NUMBERAL DESI	# 01000 0141 00101 FDFBF 1161 FDG1
13941 S.W. 105 STREET 13941 S.W. 105 STREET MIAMI FL 33186 MIAMI FL 33186				
			DO NOT WRITE IN T	HIS SPACE
			3. Date Incorporated or Qualified 05/12/1997	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26		65-0753536	Not Applicable
Sulte, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22	27			Fee Required
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	Zip	Country	8. This corporation owes or has paid th	
Zip Country 24 25	29	30	Personal Property Tax due June 30.	Yes No
9. Name and Address of Curren		100	10. Name and Address of New Registe	
GONZALEZ, JOSEPH R		B1 Name		
13941 S.W. 105 STREET		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
MIAMI FL 33186		Sireer Add	1988 (1.O. DOX 140HDdr is 140t Acceptable)	
WIRWIN & E OO TOO		В3		
		84 City		85 Zip Code
		Day City		
11. Pursuant to the provisions of Sections 607.050: office or registered agent, or both, in the State agent. I am familiar with, and accept the obligations of the obligation	of Florida, Such change was	authorized by the coroora	poration submits this statement for the purportion's board of directors. I hereby accept the	se of changing its registered appointment as registered
SIGNATURE				
Signature, typed or ponted name of registered age		TE Registered Agent signature requi	<u>.</u>	ATE
12. OFFICERS AND	DELETE	13.	ADDITIONS/CHANGES TO OFFICERS	Change Addition
TITLE PD	TT Nerest	1.1 TITLE		C outride C ventuon
NAME GONZALEZ, JOSEPH R STREET ADDRESS 13941 S.W. 105 STREET		1.2 NAME 1.3 STREET ADDRESS		
48448 51 46466		1.4 CITY-ST-ZIP		
CITY-ST-ZIP MLAMI FL 33186	DELETE	2.1 TITLE		Change Addition
NAME		22 NAME		
STREET ADDRESS		2.3 STREET ADDRESS		
CITY-ST-ZIP		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. CHTY - ST - ZIP		
TITLE	DELETE	4.1 TITLE		Change Addition
NAME		. 4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY - ST - ZIP		
TITLE	☐ DELETE	5.1 TITLE		Change Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE	☐ DELETE	6.1 TITLE		Change Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
		6.4 CITY-ST-ZIP		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(), Florida Statutes. Interfer 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.

JOSEPH R. GONZALEZ, PRESIDENT

(305) 382-9469

Q. 7 E MA (305) 382-9469