## 2001 UNIFORM BUSINESS REPORT (UBR)

## FILED May 04, 2001 8:00 am Secretary of State DOCUMENT # P97000067583 1. Entity Name O.G.I., INC. 05-04-2001 90129 016 \*\*\*158.75 Principal Place of Business Mailing Address 5921 TOWN BAY 5921 TOWN BAY UUU47583 **BOCA RATON FL 33486 BOCA RATON FL 33486** 2. Principal Place of Susiness 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0773681 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent LEVINE & SEGAUL, P.A. Street Address (P.O. Box Number is Not Acceptable) 4300 N. UNIVERSITY DR., STE. A-106 FT. LAUDERDALE FL 33351 Zip Code FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PS TITLE ☐ Change ☐ Delete TITLE ☐ Addition O'DONNELL, EDWARD J NAME NAME STREET ADDRESS 5921 TOWN BAY #7-32 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BOCA RATON FL 33431 TITLE ☐ Delete TITLE Change ☐ Addition O'DONNELL, DOLORES NAME NAME STREET ADDRESS 5921 TOWN BAY #7-32 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33431** ☐ Delete TIFLE Change ☐ Addition O'DONNELL, EDDIE JR NAME NAME STREET ADDRESS 5921 TOWN BAY #7-32 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33431** TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME O'DONNELL, JEANNETTE NAME STREET ADDRESS 5921 TOWN BAY #7-32 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33431** TITLE ☐ Delete ☐ Addition TITLE Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other ke empowered.

SIGNATURE: