FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT #** P97000078052 (2) ODD JOBS GEORGE, INC. Principal Place of Business Mailing Address 1408 PARKWAY DRIVE 1408 PARKWAY DRIVE PANAMA CITY FL 32404 PANAMA CITY FL 32404 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/08/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 59-3475909 21 26 Not Applicable Suite, Apl. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State Crty & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Zip Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No Personal Property Tax due June 30. 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name GORSKY, GEORGE JR 1408 PARKWAY DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) PANAMA CITY FL 32404 83 City 84 Zip Code .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 lamiliar with, and accept the obligations of, Segion 607.0505, Florida Statutes. (NOTF: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change TITLE 1.1 TITLE President / Director NAME 1.2 NAME STREET ADDRESS 1.3 STREET ADDRESS City PANAMA CITY-ST-ZIP 1.4 CITY-ST-ZIP secretary T DELETÉ TITLE 2.1 TITLE Change Seri Castriota 901 Redbird Lane NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS HAVEN FL 32404 CITY - ST - ZIP 2. 4 CITY-ST-ZIP DELETE 3.1 TITLE Change TITLE NAME 3.2 NAME STREET ADORESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP

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## Apr 29 1998 8:00am Secretary of State



STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP CITY-ST-ZIP 14. Thereby 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 annual report is frue 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 recover 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.

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