

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 29, 1999 8:00 am
Secretary of State

04-29-1999 90283 036 ***158.75

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1. Corporation Name

ACCURATE ACCOUNTING & FINANCIAL SERVICES
INC.

Principal Place of Business

Mailing Address

51 NE 184 TERR
MIAMI FL 33179



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

JAN 14TH, 1998

4. FEI Number

65-0810303

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 the current year Intangible

Personal Property Tax.

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

BOLARINWA D. OWANIKIN
51 NE 184 TERR
MIAMI FL 33179

10. Name and Address of New Registered Agent

81 Name

JOSEPH A. OWANIKIN

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

51 NE 184 TERR

83

84 City

MIAMI

FL

85 Zip Code

33179

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 JOSEPH A. OWANIKIN

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/24/99
DATE

12. OFFICERS AND DIRECTORS

TITLE PRESIDENT ☐ DELETE
NAME BOLARINWA D. OWANIKIN
STREET ADDRESS 51 NE 184 TERR
CITY-ST-ZIP MIAMI FL 33179

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
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STREET ADDRESS
CITY-ST-ZIP

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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 VICE PRESIDENT ☐ Change ☒ Addition
1.2 NAME JOSEPH A. OWANIKIN
1.3 STREET ADDRESS 51 NE 184 TERR
1.4 CITY-ST-ZIP MIAMI FL 33179

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 an attachment with an address, with all other like empowered.

SIGNATURE:

JOSEPH A. OWANIKIN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/24/99

Daytime Phone #

(305) 336-6908

CR2E034 (11/98)