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

DOCUMENT # **P98000101773**1. Corporation Name

O'BRIEN & ASSOCIATES, INC.

Principal Place of Business

Mailing Address

6538 RACQUET CLUB DRIVE LAUDERHILL FL 33319

6538 RACQUET CLUB DRIVE LAUDERHILL FL 33319

FILED May 10, 1999 8:00 am Secretary of State

05-10-1999 90178 018 ***150.00



DO NOT WRITE IN THIS SPACE

					3. Date Incorporated or Qualifed	
					12/08/1998	
2. Principal Place of Business 2a. Mailing Address 2b. 17977 7B ROAD W. 2c. 17977 7B ROAD				ON.	4. FEI Number 65-088 1904 211912 Applied For Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc. 27					5. Certifcate of Status Desired Sa.75 Additional Fee Required	
City & State				Ξ	6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees	
Zip Country Zip 33470 Zip 33470 Courtry Zip 33470 Zip 34470 Zip 34					8. This corporation owes the current year Intangible Personal Property Tax.	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent						
			8	1 Name		
AMERILAWYER				82 Street Address (P.O. Box Number is Not Acceptable)		
343 ALMERIA AVENUE						
CORAL GABLES FL 33134			8	83		
			8	4 City	FL 85 Zip Code	
44 Dureuant	to the provisions of Sections 607 0502	and 607 1508 Florida Statutes	the abo	ve-named	corporation submits this statement for the purpose of changing its registered	
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.						
l		ons of, Section 607.0505, Florida	Statute	. S.		
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Re	gistered Ag	ent signature r	equired when reinstating) DATE	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	☐ DELETE	1.1 TITLE	:	PD i ☑ Change ☐ Addition	
NAME	O'BRIEN, EDWARD C		1.2 NAME	Ē	EDWARD OBRIEN	
STREET ADDRESS	6538 RACQUET CLUB DRIVE		1.3 STRE	ET ADDRESS	LINGTH TO POAD V	
CITY-ST-ZIP	LAUDERHILL FL 33319		1.4 CITY-	ST-ZIP	LOXAHATUHEE FL 33410	
TITLE	ST	☐ DELETE	2.1 TITLE		ST Change Addition	
NAME	GLAROS, MARIE		2.2 NAME		MARIE GLAROS	
STREET ADDRESS			2.3 STRE	ET ADDRESS	17977 78 ROAD N 221110	
CITY-ST-ZIP	LAUDERHILL FL 33319		2. 4 CITY		LOYAHATOHEE FL 33470	
TITLE		☐ DELETE	3.1 TTTLE		☐ Change ☐ Addition	
NAME			3.2 NAME		.,	
STREET ADDRESS	i			ET ADDRESS		
CITY-ST-ZIP		☐ DELETE	3.4. CITY		☐ Change ☐ Addition	
TITLE		☐ NETELE	4.1 TITLE			
NAME	\		4. 2 NAM	ET ADDRESS		
STREET ADDRESS			4.3 STRE			
CITY-ST-ZIP		DELETE	5.1 TITLE		☐ Change ☐ Addition	
NAME		_	5.2 NAME			
STREET ADDRESS			5.3 STRE	ET ADDRESS		
CITY-ST-ZIP			5.4 CITY-	ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition	
NAME	!		6.2 NAME	E		
STREET ADDRESS	,		6.3 STRE	ET ADDRESS		
CITY-ST-ZIP			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: