

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morhart  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
95 FEB 14 PM 12:43

DOCUMENT # **S75412** (4)

1. Corporation Name  
**O.P.H. CONSULTANTS, INC.**

Principal Place of Business Mailing Address  
~~% ACCOUNTING & BUSINESS CONSULTANTS INC~~ % ACCOUNTING & BUSINESS CONSULTANTS INC  
~~790 E BROWARD BLVD SUITE 302~~ 790 E BROWARD BLVD SUITE 302  
~~FT LAUDERDALE FL 33301~~ FT LAUDERDALE FL 33301

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business 2b. Mailing Address  
21 10166 N.W. 3rd Court 26  
Suite, Apt. #, etc. Suite, Apt. #, etc.  
22 City & State 27  
23 Plantation, Fl. 28  
Zip Country Zip Country  
24 33324 25 USA 29 30

3. Date Incorporated or Qualified 08/23/1991 3a. Date of Last Report 03/17/1994  
4. FEI Number 65-0279103 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 has liability for intangible tax under S. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent  
BEFELD, ROBERT  
~~% ABC~~  
~~790 E BROWARD BLVD, STE 302~~  
~~FT LAUDERDALE FL 33301~~

10. Name and Address of New Registered Agent  
B1 Name  
B2 Street Address (P.O. Box Number is Not Acceptable) 10166 N.W. 3rd Court  
B3  
B4 City Plantation B5 Zip Code FL 33324

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

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

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS  
TITLE NAME STREET ADDRESS CITY- ST- ZIP  
DP BEFELD, ROBERT F 800 COUNTRY PL #902 HOUSTON TX  
D BEFELD, KARINA R 800 COUNTRY PL #902 HOUSTON TX  
D BEFELD, HAYLEE A 800 COUNTRY PL #902 HOUSTON TX

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1.1 TITLE  Change  Addition  
1.2 NAME  
1.3 STREET ADDRESS 10166 N.W. 3rd Court  
1.4 CITY- ST- ZIP Plantation, Fl. 33324  
2.1 TITLE  Change  Addition  
2.2 NAME Befeld, ~~Carina~~ KARINA R.  
2.3 STREET ADDRESS 10166 N.W. 3rd Court  
2.4 CITY- ST- ZIP Plantation, Fl. 33324  
3.1 TITLE  Change  Addition  
3.2 NAME BEFELD, HAYLEE A  
3.3 STREET ADDRESS 10166 N.W. 3rd Court  
3.4 CITY- ST- ZIP Plantation, Fl. 33324  
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 do hereby certify that the information supplied in this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(9)(b), Florida Statutes. I further certify that the information included in 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 hereof, or as an attachment with an address.

SIGNATURE:

Robert F. Befeld

18 Feb 95

305-474-1755