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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # 295363

1. Corporation Name

(6)

OAKLAND ENTERPRISES, INC.

FILED
May 16 1997 8:00am
Secretary of State



513 LAKE BLU P.O.BOX 1594 LAKE PLACID	•	Mailing Address 513 LAKE BLUE DRIVE P.O.BOX 1594 LAKE PLACID FL 33852-9676			I HORING HOLD ICKER ONDER ANIAR OLINER LINE BERLE GEBE GROWN					
							3. Date incorporated or Qualified 07/28/1965		e of Last I 1/1996	Report
₁	Place of Business		Mailing Addres	S			4. FEI Number			pplied For
21	t # alo	26	Cuito Ant III o	+		<u></u>	59-1279724	·····		lot Applicable
Surte, Apt 22	IL #, EIC.	27	Suite, Apt. #, e	ic.			6. Certificate of Status Desired			Additional Regulred
City & Sta	ate		City & State				6. Election Campaign Financing		\$5.00) May Be
23		28					Trust Fund Contribution		Added	to Fees
Zip ~~	Country		Zip	├ ─¬	Country		8. This corporation has liability for			s. 199.032,
24	9. Name and Address of Cu	29 trent Begis	tered Agent	30		· · · · · · · · · · · · · · · · · · ·	Florida Statutes 10. Name and Address of New Re		No	
CD/	AWFORD, ROBERT W.	mont nogu	Nerso Agent		81	Name	10, reality allo Rootbas of their file	Altroide V	year	
	15 EAST BROWARD BLVD.		-	4,		ish				
	LAUDERDALE FL 33301			٠.,	82	Street Addr	ess (P.O. Box Number is Not Acceptat	ole)		
.,,	DIODENDINE I C OOO I				83					
					84				les 7in	Code
				*		City	•	FL	85 Zip	Code
SIGNATURE.	Signature, typest or printed name of registers	ed agent and title	if applicable	INOTE: Reg	istered Age		on's board of directors. I hereby accept administration of the directors	DATE		
12.		AND DIRE			13.		ADDITIONS/CHANGES TO OFFICE			
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STREET ADDRESS										
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I do nevery centry that the information supplied with this thing does not qualify for the exemption stated in Section 119.07(a)(j), 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.

SIGNATURE:

Daytime Pho

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