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

STREET ADDRESS

SIGNATURE:

Mar 11 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Martham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (0) 594195 OAKDALE INVESTMENTS, INC. Principal Place of Business Mailing Address **37 TANBARK CRES** 37 TANBARK CRES. DON MILLS. ONTARIO DON MILLS. ONTARIO DO NOT WRITE IN THIS SPACE CANADA M3B1N CANADA M3B1N 3. Date Incorporated or Qualified 11/27/1978 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-1865678 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes 25 Personal Property Tax due June 30. □ No 24 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ATA NAS 10 JOHN ALBA CONSULTING CORP. Street Address (P.O. Box Number is Not Acceptable) 82 1420 COURT STREET 83 **GLEARWATER FL 34616** 84 City Zip Code 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 agod, 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 land a both the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) CR2E034 (10/97 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Addition Change TITLE 11 TITLE FREEDMAN, L. DAVID NAME 12 NAME 37 TANBARK CRES. STREET ADDRESS 1.3 STREET ADORESS DON MILLS, ONT. CAN. 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 2.1 TITLE Change Addition TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition Change TITLE 31 TO LE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP ☐ DELETE 4.1 TITLE Change ☐ Addition TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CiTY-ST-ZIP CITY-ST-ZIP DELETE Addition 5.1 TITLE Change TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE 6.2 NAME NAME

6.3 STREET ADDRESS 64 CITY-ST-ZIP 14. Thereby 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 eath; 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 attaching at with each does.

L. DAVID FREEDMENT

FILED

446-421-3020