SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT
1995

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

FILED
95 JUL 25 AM 8:12
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # F93000003722 (6)

1. Corporation Name
OPI, INC.

Principal Place of Business
~~4670 CAROLINA AVENUE~~
~~RICHMOND VA 23222~~

Mailing Address
~~4670 CAROLINA AVENUE~~
~~RICHMOND VA 23222~~
P.O. Box 129
Wheeling, IL, 60090

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/16/1993
3a. Date of Last Report: 08/23/1994
4. FEI Number: 54-1650392 — 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

2. Principal Place of Business
21 P.O. Box 129
Suite, Apt. #, etc.
22
City & State
23 Wheeling, IL
Zip
24 60090
Country
25 USA

2a. Mailing Address
26 P.O. Box 129
Suite, Apt. #, etc.
27
City & State
28 Wheeling, IL
Zip
29 60090
Country
30 USA

9. **Name and Address of Current Registered Agent**

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. **Name and Address of New Registered Agent**
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City — FL
85 Zip Code

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 ______ DATE ______

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY ST ZIP
P	MCCARTHY, LUKE	4670 CAROLINA AVENUE	RICHMOND VA
V	KILLION, D P	2700 SANDERS ROAD	PROSPECT HEIGHTS IL 60070
VSD	GLICK, P J	2700 SANDERS ROAD	PROSPECT HEIGHTS IL 60070
V	DELUCA, M A	2700 SANDERS ROAD	PROSPECT HEIGHTS IL 60070
VD	FRIEDRICH, D A	2700 SANDERS ROAD	PROSPECT HEIGHTS IL 60070
V	MAURICE, F J	2700 SANDERS ROAD	PROSPECT HEIGHTS IL 60070

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

#	TITLE	NAME	STREET ADDRESS	CITY ST ZIP	Change	Addition
1	Assistant Secretary	Joe Angelo	2700 Sanders Rd	Prospect Heights, IL 60070	☒	☐
2	V	John Owens	2700 Sanders Rd	Prospect Heights, IL 60070	☒	☐
3	M/M Vice Pres, + Sec.	Lou Bu [illegible]	2700 Sanders Rd.	Prospect Heights, IL 60070	☒	☐
4					☐	☐
5					☐	☐
6	Director	Glen Fick	2700 Sanders Rd.	Prospect Heights, IL 60070	☒	☐

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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.

SIGNATURE: [signature] John Owens — 7/17/95 — 708/564-6276
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (3/95)

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