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

FILED
Jan 20 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT **1998**

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

DOCUMENT # **F94000005711 (6)**

1. Corporation Name
OFL-A RECEIVABLES CORP.

Principal Place of Business	Mailing Address
2131 PALOMAR AIRPORT RD SUITE 300 CARLSBAD CA 92009-2115 US	12750 HIGH BLUFF DR., #320 SAN DIEGO CA 92130 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21	26 11452 El Camino Real
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc. 400
23 City & State	28 City & State San Diego, CA
24 Zip / 25 Country	29 Zip 92130 / 30 Country USA

3. Date Incorporated or Qualified: **11/03/1994**

4. FEI Number: **33-0567304** ☐ 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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
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 ______ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PDC	☐ DELETE	1.1 TITLE	P/C ☒ Change ☐ Addition
NAME	BURDICK, GARY		1.2 NAME	
STREET ADDRESS	~~1405 HERMOSA AVE.~~		1.3 STREET ADDRESS	11452 El Camino Real, Suite 400
CITY-ST-ZIP	~~HERMOSA BEACH CA 90254~~		1.4 CITY-ST-ZIP	San Diego, CA 92130
TITLE	SDC	☐ DELETE	2.1 TITLE	D ☒ Change ☐ Addition
NAME	STEWART, RELLEN		2.2 NAME	
STREET ADDRESS	~~2874 ROCKINGHORSE CIR~~		2.3 STREET ADDRESS	11452 El Camino Real, Suite 400
CITY-ST-ZIP	~~ENCINITAS CA 92024~~		2.4 CITY-ST-ZIP	San Diego, CA 92130
TITLE	VD	☐ DELETE	3.1 TITLE	D ☒ Change ☐ Addition
NAME	WARD, JEFF		3.2 NAME	
STREET ADDRESS	610 W. ASH ST., #1500		3.3 STREET ADDRESS	
CITY-ST-ZIP	SAN DIEGO CA 92101		3.4 CITY-ST-ZIP	
TITLE	BM	☐ DELETE	4.1 TITLE	D ☒ Change ☐ Addition
NAME	FABIANO, ROCCO J.		4.2 NAME	
STREET ADDRESS	~~12750 HIGH BLUFF DR., STE 320~~		4.3 STREET ADDRESS	11452 El Camino Real, Suite 400
CITY-ST-ZIP	~~SAN DIEGO CA~~		4.4 CITY-ST-ZIP	San Diego, CA 92130
TITLE	VP	☐ DELETE	5.1 TITLE	V/S ☒ Change ☐ Addition
NAME	COHEN, JACK R.		5.2 NAME	
STREET ADDRESS	~~12750 HIGH BLUFF DR., SUITE 320~~		5.3 STREET ADDRESS	11452 El Camino Real, Suite 400
CITY-ST-ZIP	~~SAN DIEGO CA~~		5.4 CITY-ST-ZIP	~~San Diego, CA 92130~~
TITLE	D	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	MARX, OWEN		6.2 NAME	
STREET ADDRESS	350 PARK AVE., 15TH FLOOR		6.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY 10022		6.4 CITY-ST-ZIP	

CR2E034 (10/97)

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.

SIGNATURE Jack R. Cohen 1-9-98 (619) 793-6300