CORPORATION ANNUAL REPORT 1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 31 AM 11:06

DO NOT WRITE IN THIS SPACE

DOCUMENT # K32055 (1)

1. Corporation Name
OPARK LANE (N.V.) INC.

Principal Place of Business	Mailing Address
3049 NE 163RD ST N MIAMI BEACH FL 33160 US	3049 NE 163RD ST N MIAMI BEACH FL 33160 US

3. Date Incorporated or Qualified: 08/30/1988
3a. Date of Last Report: 03/11/1994
4. FEI Number: 59-2118270 ☐ 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		2a. Mailing Address
21	3115 NE 163rd Street	26	3115 NE 163rd Street
22	Suite, Apt. #, etc	27	Suite, Apt. #, etc
23	City & State: North Miami Beach, FL	28	City & State: North Miami Beach, FL
24	Zip: 33160	29	Zip: 33160
25	Country: USA	30	Country: USA

9. Name and Address of Current Registered Agent

WHITE, NANCY C.
3049 NORTHEAST 163RD STREET
NORTH MIAMI FL 33160

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	XX	1 1 TITLE	S/D ☒ Change ☐ Addition
NAME	BROD, KAREN	1 2 NAME	
STREET ADDRESS	3049 N.E. 163RD STREET	1 3 STREET ADDRESS	
CITY ST ZIP	N. MIAMI FL 33160	1 4 CITY ST ZIP	
TITLE	PD	2 1 TITLE	☐ Change ☐ Addition
NAME	SREDNI, ISAAC	2 2 NAME	
STREET ADDRESS	3049 N.E. 163RD STREET	2 3 STREET ADDRESS	
CITY ST ZIP	N. MIAMI FL 33160	2 4 CITY ST ZIP	
TITLE	VD	3 1 TITLE	☐ Change ☐ Addition
NAME	SREDNI, ERWIN	3 2 NAME	
STREET ADDRESS	3049 NE 163RD ST	3 3 STREET ADDRESS	
CITY ST ZIP	N MIAMI BEACH FL 33160	3 4 CITY ST ZIP	
TITLE		4 1 TITLE	☐ Change ☐ Addition
NAME		4 2 NAME	
STREET ADDRESS		4 3 STREET ADDRESS	
CITY ST ZIP		4 4 CITY ST ZIP	
TITLE		5 1 TITLE	☐ Change ☐ Addition
NAME		5 2 NAME	
STREET ADDRESS		5 3 STREET ADDRESS	
CITY ST ZIP		5 4 CITY ST ZIP	
TITLE		6 1 TITLE	☐ Change ☐ Addition
NAME		6 2 NAME	
STREET ADDRESS		6 3 STREET ADDRESS	
CITY ST ZIP		6 4 CITY ST ZIP	

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)(k), 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: Isaac Sredni 3/24/95 (305) 945 9791
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0172644 CP