

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

FILED

Jan 28 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P03008 (0)

1. Corporation Name
OAKRIDGE ENTERPRISES, INC.

Principal Place of Business 17971 BISCAYNE BLVD. STE 212 N. MIAMI BEACH FL 33160	Mailing Address 17971 BISCAYNE BLVD. STE 212 N. MIAMI BEACH FL 33160-2532
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2. Principal Place of Business 21 19707 Turnberry Way Suite, Apt. #, etc. #27-J City & State 23 AVENTURA, FLORIDA Zip Country 24 33180 25 U.S.A.		2a. Mailing Address 26 19707 Turnberry Way Suite, Apt. #, etc. #27-J City & State 28 AVENTURA, FLORIDA Zip Country 29 33180 30 U.S.A.		3. Date Incorporated or Qualified 08/13/1984	3a. Date of Last Report 04/23/1996
4. FEI Number 54-0951898		Applied For <input type="checkbox"/> Not Applicable		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent PUDER, BERNARD 19707 TURNBERRY WAY #27J N. MIAMI BEACH FL 33180		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	
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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 B. Puder - BERNARD PUDER PP DATE 1/21/97
(Signature of agent or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE	Change <input type="checkbox"/> Addition
NAME	PUDER, BERNARD	1.2 NAME	
STREET ADDRESS	19707 TURNBERRY WAY	1.3 STREET ADDRESS	
CITY-ST-ZIP	N MIAMI BEACH FL	1.4 CITY-ST-ZIP	
TITLE	VD <input type="checkbox"/> DELETE	2.1 TITLE	Change <input type="checkbox"/> Addition
NAME	PUDER, MICHAEL	2.2 NAME	
STREET ADDRESS	19707 TURNBERRY WAY	2.3 STREET ADDRESS	
CITY-ST-ZIP	N MIAMI BEACH FL	2.4 CITY-ST-ZIP	
TITLE	SD <input type="checkbox"/> DELETE	3.1 TITLE	Change <input type="checkbox"/> Addition
NAME	PUDER, SANDRA	3.2 NAME	
STREET ADDRESS	19707 TURNBERRY WAY	3.3 STREET ADDRESS	
CITY-ST-ZIP	N MIAMI BEACH FL	3.4 CITY-ST-ZIP	
TITLE	TD <input type="checkbox"/> DELETE	4.1 TITLE	Change <input type="checkbox"/> Addition
NAME	PUDER, JODI	4.2 NAME	
STREET ADDRESS	19707 TURNBERRY WAY	4.3 STREET ADDRESS	
CITY-ST-ZIP	N MIAMI BEACH FL	4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	Change <input type="checkbox"/> 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 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 (Change) or on an attachment with an address.

SIGNATURE: B. Puder - BERNARD PUDER DATE 1/21/97 DAYTIME PHONE # (305) 975-2128
(Signature and typed or printed name of signing officer or director)

CR2E034 (9/96)