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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P19974 (5)

ONIKA CORPORATION

Princi	pal Plac	e of B	บร์เกอรร	<del></del> -
	GEORG			

Mailing Address

C/O GEORGE A. STRAITOR 1201 PARKLANE TOWERS W.

## **FILED** Mar 09 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE DEARBORN MI 48126 DEARBORN MI 48126 3. Date incorporated or Qualified 07/08/1988 2. Principal Place of Business 2a. Mailing Address Applied For 38-2807402 21 Not Applicable Suite, Apt #, etc. Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution 23 Added to Fees 28 Country Country 8. This corporation owes or has paid the current year intangible Yes 25 ☐ No 24 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** Name TODD, RICHARD 1601 S.E. 16TH STREET 82 Street Address (P.O. Box Number is Not Acceptable) FORT LAUDERDALE FL 33318 83 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or proted name of registered agont and title if applicable (NOTE: Registered Agent algorithms required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 1.1 TITLE ALANDT, PAUL NAME 12 NAME **635 LAKESHORE DRIVE** STREET ADDRESS 1.3 STREET ADDRESS **GROSSE PT SHORES MI** CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE DELETE 2.1 TITLE Change Addition ALANDT, LYNN F. 2.2 NAME **635 LAKESHORE DRIVE** 2.3 STREET ADDRESS STREET ADDRESS GROSSE PT SHORES MI 2. 4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE ALANDT, LYNN F. 3.2 NAME NAME **835 LAKESHORE DRIVE** 3.3 STREET ADDRESS STREET ADDRESS GROSSE PT SHORES MI CITY-ST-ZIP 3.4 CITY-ST-ZIP Addition DELETE Change TITLE 41 TITLE HEMPSTEAD, DAVID M. NAME 4. 2 NAME **RENAISSANCE CENTER, FL34** STREET ADDRESS 4.3 STREET ADDRESS **DETROIT MI** CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 51 TITLE TODD, RICHARD NAME 5.2 NAME STREET ADDRESS 1601 SE 16 STREET 5.3 STREET ADDRESS FT. LAUDERDALE FL CITY-ST-ZIP 5.4 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 in on attaglighted with my address.

61 TITLE

6 2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

**CUNDIFF, RICHARD** 

DEARBORN MI

1201 PARK LANE TOWER W.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

DELETE

Change

Addition