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FILED

Apr 14 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 # P20287

(9)

1. Corporation Name

OLD OAKFIELD CORPORATION

Principal Place of Business

32 LOCKERMAN SO
STE L100
DOVER DE 19901
US

Mailing Address

32464 CROWN VALLEY PKWY
C/O G FREI APT #107
DANA POINT CA 92629
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/01/1988

4. FEI Number

58-1796429

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

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 33381 SPINDLE CIRCLE
Suite, Apt. #, etc.

27 C/O G. FREI

28 DANA POINT, CA

29 92629 30 USA

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

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 fee, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME FREI, DORA
STREET ADDRESS APT. 17A LA NATIONALE
CITY-ST-ZIP 3962 MONTANA

TITLE TD ☒ DELETE

NAME FREI, GABRIELA R.
STREET ADDRESS 32465 CRWON VALLEY PARKWAY #107
CITY-ST-ZIP DANA POINT CA

TITLE VD ☒ DELETE

NAME FREI, PAUL
STREET ADDRESS 3962 MONTANA
CITY-ST-ZIP 3962 MO

TITLE S ☒ DELETE

NAME BICKEL, ALEXANDER
STREET ADDRESS 32464 CROWN VALLEY PARKWAY #107
CITY-ST-ZIP DANA POINT CA

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE TD ☒ Change ☐ Addition

1.2 NAME FREI, GABRIELA R.
1.3 STREET ADDRESS 33381 SPINDLE CIRCLE
1.4 CITY-ST-ZIP DANA POINT, CA 92629

2.1 TITLE VD ☒ Change ☐ Addition

2.2 NAME FREI, PAUL
2.3 STREET ADDRESS APT 17A LA NATIONALE
2.4 CITY-ST-ZIP 3962 MONTANA

3.1 TITLE S ☒ Change ☐ Addition

3.2 NAME BICKEL, ALEXANDER
3.3 STREET ADDRESS 33381 SPINDLE CIRCLE
3.4 CITY-ST-ZIP DANA POINT, CA 92629

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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

CR2E034 (10/97)