

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 08, 2003 8:00 am
Secretary of State

05-08-2003 90169 045 ***158.75

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1. Entity Name
OPM, INC.



Principal Place of Business
8311 NW 50TH ST
LAUDERHILL FL 33351
US

Mailing Address
8311 NW 50TH ST
LAUDERHILL FL 33351
US



2. Principal Place of Business

2800 SW 4th Ave.

3. Mailing Address

2800 SW 4th Ave

Suite, Apt. #, etc.

Suite 6

Suite, Apt. #, etc.

Suite 6

☒ CHECK HERE IF MAKING CHANGES

City & State

Ft Lauderdale FL

City & State

Ft Lauderdale FL

4. FEI Number

65-0450056

Applied For

Not Applicable

Zip

33315

Country

US

Zip

33315

Country

US

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LANDER, STROUBE W SR
8311 NW 50TH ST
LAUDERHILL FL 33351

7. Name and Address of New Registered Agent

Name Grant Carrick

Street Address (P.O. Box Number is Not Acceptable)

2800 SW 4th Ave Suite 6

City Ft Lauderdale

FL

Zip Code 33315

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Grant Carrick* Grant Carrick CEO

5-1-03

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PTS
NAME LANDER, STROUBE W II
STREET ADDRESS 8311 NW 50TH ST
CITY-ST-ZIP LAUDERHILL FL 33351 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE CEO
NAME Grant Carrick
STREET ADDRESS 2800 SW 4th Ave Suite 6
CITY-ST-ZIP Ft Lauderdale FL 33315 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Grant Carrick* RE Grant Carrick CEO 5-1-03 954-523-6602

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)