

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000038732 (0)

1. Corporation Name

OPEN ROAD INVESTMENTS, INC.



Principal Place of Business

1725 MULFORD AVENUE
BRONX NY 10461

Mailing Address

1725 MULFORD AVENUE
BRONX NY 10461

3. Date Incorporated or Qualified

05/16/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MESHELL, JACQUES
7800 RED ROAD STE 120
MIAMI FL 33143

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 607.0902 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 607.0905, Florida Statutes.

SIGNATURE

Michael A. O'Connor

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE ☐ DELETE

NAME
D
O'CONNOR, MICHAEL A
1725 MULFORD AVENUE
BRONX NY 10461

2. TITLE ☐ DELETE

3. TITLE ☐ DELETE

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19. TITLE ☐ DELETE

20. TITLE ☐ DELETE

1. TITLE ☐ Change ☐ Addition

2. NAME ☐ Change ☐ Addition

3. STREET ADDRESS ☐ Change ☐ Addition

4. CITY-ST-ZIP ☐ Change ☐ Addition

5. CITY-ST-ZIP ☐ Change ☐ Addition

6. CITY-ST-ZIP ☐ Change ☐ Addition

7. CITY-ST-ZIP ☐ Change ☐ Addition

8. CITY-ST-ZIP ☐ Change ☐ Addition

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19. CITY-ST-ZIP ☐ Change ☐ Addition

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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:

Michael A. O'Connor

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/02/96

718 855-8855

CR2E034 (12/95)