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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000067948 (5)

OCRAM ASSOCIATES, INC.

FILED Apr 28 1998 8:00am Secretary of State

i						
Principal Place of Business Mailing Address					T 130111501 119 10110 01511 00111 00111 00111 00111	\$\$1\$\$ 1 6310 \$0\$11 0106 1 1011 (801
2635 WEST 818T ST. 2635 WEST 818T ST.						
HIALEAH FL 33016 HIALEAH FL 33016					DO NOT WOLLE IN THE	0.004.05
					DO NOT WRITE IN THI 3. Date Incorporated or Qualified	5 SPACE
					08/15/1996	
2. Principal P	ace of Business	2a. Mailing Address			4. FEI Number	Applied For
21	26				65-0730362	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						\$8.75 Additional
22 27					5. Certificate of Status Desired	Fee Required
City & State City & State					6. Election Campaign Financing	\$5.00 May Be
28					Trust Fund Contribution	Added to Fees
Zip			Countr	у	8. This corporation owes or has paid the o	urrent year Intangible
24 25 29 30					Personal Property Tax due June 30.	☐ Yes ☐ No
	g, Name and Address of Curre	nt Registered Agent		,	10. Name and Address of New Registere	d Agent
	OLFSON, DAVID A		81	Name		
15:	321 S. DIXIE HIGHWAY		82	Street Addr	ress (P.O. Box Number is Not Acceptable)	
SUITE 209						<u>.</u>
Mt/	AMI FL		83	H		
	. /// /		84	City		. 85 Zip Code
				,	F	L
11. Pursuant t	to the provisions of Security 607.05	02 and 607.1508, Florida Statutes	s, the abov	re-named corp	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	of changing its registered
agent. I a	m familiar with to his the oblig	ations of, Section 607.0505, Flor	ida Statute	s.	tion's board of directors. Thereby accept the ap	portunent as registered
SIGNATURE	Novel .				L. IBECH	1778
	Signature, typed or printed name of its istered ag			ent eignature requir	red when rainstating) DATE	
12.	OFFICERS AN	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	
TITLE	DE LA SIERRA, WILLIAM J	☐ DELETE	1.1 TITLE	1		Change Addition
NAME	2635 WEST 81ST ST.		1.2 NAME			
STREET ADORESS	HIALEAH FL 33016			T ADDRESS		
CITY-ST-ZIP TITLE	TIPLESTITE SSOID	DELETE	1.4 CITY-1 2.1 TITLE	ST - ZIP		Change Addition
NAME			2.2 NAME			
STREET ADDRESS	■			T ADDRESS		
CITY-ST-ZIP			2.4 CITY-			
TITLE			3.1 TITLE	51-21F		☐ Change ☐ Addition
NAME			3.2 NAME			
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP			3.4. CITY-	i i		
TITLE		☐ DELETE	4.1 TITLE	V1-711		☐ Change ☐ Addition
NAME		-	4. 2 NAME		•	_ , _
STREET ADDRESS				T ADDRESS		
CITY - ST - ZIP			4.4 CITY-			
TITLE		DELETE 5.11				Change Addition
NAME			5.2 NAME			
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP			5.4 CITY-1			
TITLE		☐ DELETE	6.1 TITLE		<u> </u>	☐ Change ☐ Addition
NAME			6.2 NAME			
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP		01	6.4 CITY-			
	ertify that the information supplied	ville this files does not qualify for			Section 119 07(3)(i) Florida Statutos I further	partifu that the information

is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in address. indicated on this annual report or suppleme officer or director of the corporation or the Block 12 or Block 13 if changed, or on an