


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

FILED
May 14 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997				FLORIDA DEPARTMENT OF STATE Sandra S. Northam Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P96000103820 1. Corporation Name OAKLAWN ASSET MANAGEMENT, INC.					
Principal Place of Business 801 Brickell Avenue Miami, FL 33132			Mailing Address 801 Brickell Avenue Miami, FL 33132		
2. Date Incorporated or Qualified 12/27/1996		3a. Date of Last Report			
3. Principal Place of Business 21 100 N. Biscayne Blvd.		3b. Mailing Address 28 100 N. Biscayne Blvd.		4. FEI Number <input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable	
Suite, Apt. #, etc. 22 Suite 2100, New World Tower		Suite, Apt. #, etc. 27 Suite 2100, New World Tower		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
City & State 23 Miami, FL		City & State 28 Miami, FL		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May be Added to Fees	
Zip 24 33132		Country 25 U.S.A.		7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8. Name and Address of Current Registered Agent European-American Consulting Group, Inc. 801 Brickell Avenue Miami, FL 33131			10. Name and Address of New Registered Agent 81 Name Alexander Reus, Esq. 82 Street Address (P.O. Box Number is Not Acceptable) 100 N. Biscayne Blvd. #2100 83 New World Tower 84 City Miami FL 85 Zip/City 33132		
11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 607.0506, Florida Statutes. SIGNATURE <i>A. Reus</i> Alexander Reus, Esq. 4/29/1997					
12. OFFICERS AND DIRECTORS <input type="checkbox"/> DELETE TITLE D NAME Thomas Cornelius STREET ADDRESS 90 Park Avenue, Suite 1900 CITY, ST., ZIP New York, N.Y. 10016					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 <input type="checkbox"/> Change <input type="checkbox"/> Addition 1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY, ST., ZIP 2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY, ST., ZIP 3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY, ST., ZIP 4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY, ST., ZIP 5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY, ST., ZIP 6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY, ST., ZIP					
14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 199.07(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: <i>Thomas Cornelius</i> Thomas Cornelius, Director 4/29/97 (305) 377-3561					

CFR2004 (9/96)