

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

FILED
Sep 03 1998 8:00am
Secretary of State

DOCUMENT # P97000038320 (2)

1. Corporation Name

OAKHAVEN INVESTMENT CORPORATION



Principal Place of Business
20021 WEST OAKHAVEN CIRCLE
NORTH MIAMI BEACH F: 33179

Mailing Address
20021 WEST OAKHAVEN CIRCLE
NORTH MIAMI BEACH F: 33179

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/28/1997

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

4. FEI Number

65-0790585

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be

Trust Fund Contribution

☐

Added to Fees

8. This corporation owes or has paid the current year Intangible

Personal Property Tax due June 30.

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

MARCUS, BARRY J ESQUIRE
9550 BAY HARBOR TERRACE
SUITE 214
BAY HARBOR ISLAND FL 33154

10. Name and Address of New Registered Agent

81 Name
MARCUS, BARRY J. Esquire
82 Street Address (P.O. Box Number Is Not Acceptable)
1575 Ives Dairy Road
83
84 City
miami FL 85 Zip Code
33179

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]

(NOTE: Registered Agent signature required when reinstating)

8/31/98

DATE

12. OFFICERS AND DIRECTORS

TITLE President/Sec/Treas ☐ DELETE

NAME Herman Flowers
STREET ADDRESS 20021 W. Oakhaven Circle
CITY-ST-ZIP N. Miami Beach FL 33179

TITLE VICE President ☐ DELETE

NAME BARRY J. MARCUS
STREET ADDRESS 20021 W. Oakhaven Circle
CITY-ST-ZIP N. Miami Beach FL 33179

TITLE Assistant Secretary ☐ DELETE

NAME Timothy Bourque
STREET ADDRESS 20021 W. Oakhaven Circle
CITY-ST-ZIP N. Miami Beach FL 33179

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

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:

[Signature]

8/31/98 8029339622

CR2E034 (5/98)