

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 24, 2004 8:00 am**  
**Secretary of State**

03-24-2004 90041 021 \*\*\*150.00

**DOCUMENT # P98000019706**

1. Entity Name

OAKLAND/UNIVERSITY CORP.



Principal Place of Business

Mailing Address

C/O ROSEN ASSOCIATES MANAGEMENT CORP C/O ROSEN ASSOCIATES MANAGEMENT CORP  
33 SOUTH SERICE RD 33 SOUTH SERICE RD  
JERICHO NY 11753 JERICHO NY 11753

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

11-3422650

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SHAHADY, JOHN J  
HOUSTON & SHAHADY  
316 NE 4TH ST.  
FT. LAUDERDALE FL 33301

*New address →*

Name: *Adorno & Yoss c/o John J Shahady*  
Street Address (P.O. Box Number is not Acceptable): *350 E Las Olas Blvd*  
Suite: *I 700*  
City: *Fort Lauderdale* FL *33301*

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

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, 2004 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: D ☐ Delete  
NAME: ROSEN, ROBERT A  
STREET ADDRESS: 33 SOUTH SERICE RD  
CITY-ST-ZIP: JERICHO NY 11753

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

TITLE: D ☐ Delete  
NAME: ROSEN, FLORENCE  
STREET ADDRESS: 33 SOUTH SERICE RD  
CITY-ST-ZIP: JERICHO NY 11753

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

TITLE: D ☐ Delete  
NAME: ROSEN, DAVID'S  
STREET ADDRESS: 33 SOUTH SERICE RD  
CITY-ST-ZIP: JERICHO NY 11753

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

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*3/17/04*

*516 333-2000*

Date

Daytime Phone #