


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 08, 2008 08:00 AM
Secretary of State


DOCUMENT # F96000005842

1. Entity Name
OAKLAND MANAGEMENT CORP.



Principal Place of Business 31731 NORTHWESTERN HWY STE. 250W FARMINGTON HILLS, MI 48334 US	Mailing Address 31731 NORTHWESTERN HWY STE. 250W FARMINGTON HILLS, MI 48334 US
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DO NOT WRITE IN THIS SPACE



04242008 No Chg-P CR2E034 (11/05)

4. FEI Number 38-3196699	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**LUPTAK, PAOLA M
 2201 NW CORPORATE BLVD
 SUITE 100
 BOCA RATON, FL 33431**

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

06/03/08-80077-015 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD BEZNOS, MAURICE 31731 NORTHWESTERN HWY., STE 200E FARMINGTON HILLS, MI
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD BEZNOS, NORMAN 31731 NORTHWESTERN HWY., STE 200E FARMINGTON HILLS, MI
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V LUPTAK, PAOLA 2295 CORPORATE BLVD NW 240 BOCA RATON, FL 33431
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BEZNOS, HAROLD 31731 NORTHWESTERNHWY, #250W FARMINGTON, MI 48334
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: _____ **4/28/08** _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #