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## **DOCUMENT #** F96000005842 1. Entity Name OAKLAND MANAGEMENT CORP.

31371 NORTHWESTERN HWY 31371 NORTHWESTERN HWY STE. 250W STE 250W						
FARMINGTON HILLS MI 48334 FARMINGTON HILLS MI 48334	<b>8</b> 113 <b>53</b> 181 <b>86</b>	7 <b>8.1 8</b> 71 <b>8</b> 1 <b>58</b> 17				
US 2. Principal Place of Business 3. Mailing Address	I (II 18)   18					
Suite, Apt. #, etc.  Suite, Apt. #, etc.  DO NOT WRITE IN	DO NOT WRITE IN THIS SPACE					
City & State City & State 4. FEI Number	4. FEI Number Applied For Not Applicable					
Zip Country Zip Country		8.75 Ad	ditional			
6. Name and Address of Current Registered Agent 7. Name and Address of New Regis	7. Name and Address of New Registered Agent					
Name Name	stereu Ay	Jenii .				
LUPTAK, PAOLA M  Street Address (P.O. Box Number is Not Acceptable)	Street Address (P.O. Box Number is Not Acceptable)					
4700 NW BOCA RATON BLVD 4TH FLOOR		•				
BOCA RATON FL 33431 City	FL	Zip Cod	<u></u>			
SIGNATURE    Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.    FILE NOW!!! FEE IS \$150.00   After May 1, 2002 Fee will be \$550.00   After May 1, 2002 Fee will be \$550.00	DATE	\$5.0	<b>10</b> May Be			
(See criteria on back)  Make Check Payable to Department of State  Trust Fund Contribution.			to Fees			
11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICER	DO AND D	IDECTOR	C IN 44			
TITLE PTD Delete TITLE  NAME BEZNOS, MAURICE STREET ADDRESS CITY-ST-ZIP FARMINGTON HILLS MI  Delete TITLE  NAME STREET ADDRESS CITY-ST-ZIP  CITY-ST-ZIP  ADDITIONAL TITLE  NAME STREET ADDRESS CITY-ST-ZIP  CITY-ST-ZIP		□ Change	Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP  VSD Delete TITLE NAME NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP		_ Change	Addition			
TITLE  NAME STREET ADDRESS CITY-ST-ZIP  LUPTAK, PAOLA 2295 CORPORATE BLVD NW 240 BOCA RATON FL 33431  Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	_	Change	☐ Addition			
TITLE  NAME STREET ADDRESS CITY-ST-ZIP  TITLE  Delete  TITLE  Vice President Harold Beznos 31.731 Northwesternthay, Ste 25 Farmington Huls, M. 4833	50W	] Change	Addition			
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  Delete  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP		] Change	Addition			
TITLE  NAME  NAME  STREET ADDRESS  CITY-ST-ZIP  TO Delete  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  CITY-ST-ZIP	Γ.	] Change	Addition			

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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

<del>EQUI</del>MED SIGNATURE AND TYPED OR PAINTED NAME OF SIGNING OFFICER OR DIRECTOR