

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **607162 (5)**

1. Corporation Name
L.A.V. INVESTMENTS, INC.



Principal Place of Business
**1800 CHANDELLE COURT
DAYTONA BEACH FL 32124**

Mailing Address
**1800 CHANDELLE COURT
DAYTONA BEACH FL 32124**

2. Principal Place of Business
21 []
Suite, Apt. #, etc.
22 []
City & State
23 []
Zip Country
24 [] 25 []

2a. Mailing Address
26 []
Suite, Apt. #, etc.
27 []
City & State
28 []
Zip Country
29 [] 30 []

3. Date Incorporated or Qualified **11/18/1979** 3a. Date of Last Report **01/17/1995**

4. FEI Number **59-1886329** Applied For [] Not Applicable []

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

10. Name and Address of New Registered Agent

**SCHREIBER, HENRY
1800 CHANDELLE COURT
DAYTONA BEACH FL 32124**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83 []
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0602 and 607.1402, 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 607.0605, Florida Statutes.

SIGNATURE _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE	P <input type="checkbox"/> DELETE	1. TITLE	
NAME	SCHREIBER, HENRY	2. NAME	
STREET ADDRESS	1800 CHANDELLE COURT	3. STREET ADDRESS	
CITY-ST-ZIP	DAYTONA BCH FL 32124	4. CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	VP <input type="checkbox"/> DELETE	2. TITLE	
NAME	SCHREIBER, ADRIAN	2. NAME	
STREET ADDRESS	13439 SW THIRD COURT	3. STREET ADDRESS	
CITY-ST-ZIP	OCALA FL	4. CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	ST <input type="checkbox"/> DELETE	3. TITLE	
NAME	SCHREIBER, LESLIE	3. NAME	
STREET ADDRESS	1800 CHANDELLE CT	4. STREET ADDRESS	
CITY-ST-ZIP	DAYTONA BEACH FL	5. CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	D <input type="checkbox"/> DELETE	4. TITLE	
NAME	SCHREIBER, MARGARET	4. NAME	
STREET ADDRESS	1800 CHANDELLE COURT	5. STREET ADDRESS	
CITY-ST-ZIP	DAYTONA BEACH FL 32124	6. CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> DELETE	5. TITLE	
NAME		5. NAME	
STREET ADDRESS		6. STREET ADDRESS	
CITY-ST-ZIP		7. CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6. TITLE	
NAME		6. NAME	
STREET ADDRESS		7. STREET ADDRESS	
CITY-ST-ZIP		8. CITY-ST-ZIP	

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 or person empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report or on an attachment with an address.

SIGNATURE: *Henry Schreiber*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Henry Schreiber - President

Jan 24, 1996

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4-8-96