## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION



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

ANNUAL	REPORT
10	90

**DOCUMENT # 725121** 

(8)

1. Corporation	LAGE SOUTH, INC.	(-)								
					<u>.</u>					
Principal Place		Mailing Address				4 septsi tonun isadt üsibi dinik bilmid lila		811 <b>9</b> 7811 94	BI   U/U   IUB	
3180 BISCAYN MIAMI FL 3313		3180 BISCAYNE BLVD. Miami FL 33137								
						3. Date incorporated or Qualified 12/28/1972		of Last i /28/198	•	
2. Principal Place of Business		2a. Mailing Address			4. FEI Number 59-1452736			Applied For		
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite Apt. #. etc.				Not Applicable \$8.75 Additional			)
22		27	<u> </u>			5. Certificate of Status Desired	XXX	Fee Required		
City & State		City & State			Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees				
Zip	Country	Zφ	<del></del>	intry		8. This corporation has liability for int			199.032,	٦
24	9. Name and Address of Current	29  Registered Agent	30			Florida Statutes  10. Name and Address of New Rec	Yes XXN			4
		g		61	Name	TO. Italie and Address of How He	Siproron Wi	Jone	······ · · · · · · · · · · · · · · ·	-
, GISSEN,	MATTHEW			82	Street Addre	ess (P.O. Box Number is Not Acceptable)				4
	CAYNE BLVD.				OHOOL PAIGH	ress (F.O. Box Number is Not Acceptable)				
<b>MIAM</b> I FL	. 33137			83						
				84	City		FL	<b>85</b> Zip	Code	1
11. Pursuant t	to the provisions of Sections 617.0502 a	and 617.1508. Florida Statutes	the abo	L_L ove-na	amed corpora	ation submits this statement for the purpo	oso of chao	ging its re	anistered offic	
or register	red agent, or both, in the State of Florida ith, and accept the obligations of, Sectio	i. Such change was authorize	d by the	corpo	ration's board	d of directors. Thereby accept the appoin	ntment as re	gistered	agent. I am	١,
SIGNATURE										
······································	Signature, typed or printed name of registered agent at			Agent	signature required		DATE			_ (
TITLE	OFFICERS AND	DELETE	13.	TI F	77.3	ADDITIONS/CHANGES TO OFFIC		DIRECTO	Addition	
NAME	LIEBERMAN, HENRY		1.2 N			ice President Ichael Miller		Unange	**	1
STREET ADDRESS	20220 HIGHLANDS LAKES BLVI	<b>)</b> .	1.3 \$	TREET A	annocce I		,			
CITY-ST-ZIP	NO. MIAMI BEACH FL		1.4 0	ITY-ST	-ZIP M	180 Biscayne Bouleyar Iami, Florida 33137	d ————			
TITLE	STD PERSON	DELETE	2 1 Ti		l V i	ice President		Change	Addition	7
NAME STREET ADDRESS	ROEDEL, JERRY 4975 NORTHWEST 82ND AVEN	15	22 N		Gr	regory Brown				
CITY-ST-ZIP	LAUDERHILL FL	JE		IHEET A IITY - SI	ADORESS 31	80 Biscayne Bouleyar Lami, Florida 33137	d			
TITLE	D	DELETE	317			kecutive Vice Preside		Change	Addition	-
NAMÉ	SILVERMAN, IRWIN		3.2 N	AME		alera Jackson	—	•	AA.	
STREET ADDRESS	3180 BISCAYNE BOULEVARD		335	TREET A		063 S.E. oth Avenue				
CITY-ST-ZIP	MIAMI FL	——————————————————————————————————————		ITY-SI	T-ZIP Da	nia, Florida 33004				
NAME :	D Earl, Ilse	DELETE	4.1 TI		I .	ecutive Director		Change	Addition	
STREET ADDRESS	84 FAIRVIEW WEST		4.2 N			itthew Gissen				
CITY-ST-ZIP	TEQUESTA FL			17Y-ST	-ZIP M1	80 Biscayne Boulevard ami, Florida 33137	d.			
TITLE	D	DELETE	5 1 TI			-, 33131		Change	Addition	$\dashv$
NAME	HOLDER, JAY		52 N	AME						
STREET ADDRESS	5990 BIRD ROAD				ADDRESS	20000181	PC. 1	21		
CITY-ST-ZIP TITLE	MIAMI FL PD	DELETE	54 C	TY-ST	- ZIP	<del>-05/13/960101</del>	<del>0 ~0∩</del>	Change	☐ AddStee	
NAME	TREADWAY, DEEANN	Cotter	62 N			***70.00	- [	онапре	Addition	
STREET ADDRESS	1717 NORTH BAYSHORE DR.	SUITE 3256			ADDRESS			_		
CITY-ST-ZIP	MIAMI FL		6 4 C	TY-ST	- ZIP		(	)5-0	>1-96	X
certify that	t the information indicated on this annua	i report or supplemental annu:	recort i	s true	and accurate	or the exemption stated in Section 119.07 e and that my signature shall have the sa	me tenet of	foot as if	made under	丁
oatn, that	I am an officer or director of the corpora Block 12 or Block 3 if changed, or on	ation or the receiver or trustee.	empowe	red to	execute this	report as required by Chapter 617, Florid	da Statutes	; and tha	made under t my name	
	4	C 1	ەن. مارى	9						
SIGNAT	URE: / Jugary 1		VF	/		April 30, 1			73-378	+
	GREGORY Brow	PRINTED NAME OF SIGNING OFFICER JII	OR DIREC	AO		Date	Dayt	ime Phone #		