## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G00696

(6)

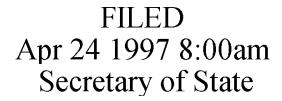
LAZGAR, INC.

Mailing Address

W NELSON D. LAZZARA

Principal Place of Business

% NELSON D. LAZZARA





1702 EAST 5TH AVE. TAMPA FL 33605		1702 EAST 5TH AVE. TAMPA FL 33605-5116					·		
						3. Date Incorporated or Qualified 09/21/1982		e of La )1/19(	st Report <b>)6</b>
· '	ace of Business	2a. Mailing Address			4. FEI Number			Applied For	
21		26			59-2266232			Not Applicable	
Suite, Apt.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State		City & State				Election Campaign Financing Trust Fund Contribution			00 May Be led to Fees
Zip 24	Country 25	<b>7</b> ip	30 Co.	Jintry		This corporation has liability for in Florida Statutes	ntangible t		er s. 199.032,
441	9. Name and Address of Curren		30	1		10. Name and Address of New Reg			<del></del>
147	ZARA, NELSON D.			81	Name				
	2 EAST 5TH AVE.			82		70.0.5			
	IPA FL 33605				Street Add	ddress (P.O. Box Number is Not Acceptable)			
. 1107				83					
				84	City			85	Zip Code
44 5	07.00	0 - 10074/00 5		Ш			FL		
office or re agent. I ar SIGNATURE	egistered agent, or both, in the State in familiar with, and accept the obliga	of Florida, Such change w htions of, Section 607.0505	ras authorize , Florida Sta	d by lutes	the corpora s.	rporation submits this statement for the pation's board of directors. I hereby accept	of the appo	ointmen	l as registered
SIGNATURE	Signature, typed or printed name of registered age	nt and little if applicable.	(NOTE Registere	d Age	nt signature req	uired when reinstating)	DATE	***	
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFIC			
TITLE	VSD	☐ DELETE	1.1 11	TLE			!	Char	ige 🔲 Addition
NAME	GARCIA, CARLOS		1.2 N						
STREET ADDRESS	3211 CORDELIA STREET		1.3 \$	THEET	ADDRESS				
CITY-ST-ZIP	TAMPA, FL 00000	Printe			T-ZIP	·		1 20	
TITLE	PTD	DELETE	2.1 11		(		ļ	Char	ge Addition
NAME	LAZZARA, NELSON D 218 6. GUNLOCK AVENUE		22 N						
STREET ADDRESS	TAMPA, FL 00000				ADDRESS				
CITY-ST-ZIP TITLE	IAMPA, PL 00000	DELETE	3.1 H		ST - 7/P			Char	ge Addition
NAME		_ veten	3.7 N		1			Car Origin	So Fres Montillin
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP					51-21P				
TITLE		DELETE	411		7. 411			Char	ge Addition
NAME			4.2 N					. —	
STREET ADDRESS			1		ADDRESS				
CITY-ST-ZIP					I - ZIP				
TITLE		☐ DELETE	5.1 1					Char	ge 🔲 Addition
NAME			5.2 N	AME					
STREET ADDRESS			5.3 S	1REET	ADDRESS				
CITY-ST-ZIP			540	17Y-S	T - ZIP				
TITLE		☐ DELETE	6.1 71	TLŧ				Chan	ge Addition
NAME			6.2 N	AME					
STREET ADDRESS			6.3 ST	REET	ADDRESS				
CITY-ST-ZIP			64C	HY-S	T - ZIP	•			
	y certify that the information supplied	with this filing does not q				ed in Section 119.07(3)(i), Florida Statutes	s. I further	certify 1	hat 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 eath; 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 12 or Block 13 if changed, or on an attachment with an address.