

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # J26702

1. Corporation Name **LYNBAR INC**
RAVENSWOOD ENTERPRISES, INC.

(7)

NC
2-13-96
#103



Principal Place of Business

5240 N BAY RD
MIAMI BEACH FL 33140

Mailing Address

5240 N BAY RD
MIAMI BEACH FL 33140

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

9. Name and Address of Current Registered Agent

PEAL, STANLEY
5240 N.BAY ROAD
MIAMI BCH. FL 33140

3. Date Incorporated or Qualified

08/01/1986

3a. Date of Last Report

02/14/1995

4. FEI Number

59-2716309

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. 193.032
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

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 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature of Registered Agent

Signature of Agent

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME PEAL, STANLEY
STREET ADDRESS 5240 N. BAY ROAD
CITY-ST-ZIP MIAMI BEACH FL

TITLE VP
NAME EDWARDS, LEROY G. JR.
STREET ADDRESS 1801 NE 28TH DRIVE
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE ST
NAME PEAL, BARRY S.
STREET ADDRESS 5240 N BAY RD
CITY-ST-ZIP MIAMI BCH. FL

TITLE S
NAME PEAL, MOLLIE
STREET ADDRESS 5240 N BAY ROAD
CITY-ST-ZIP MIAMI BEACH FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE VICE PRESIDENT
2.2 NAME LYNBAR INC
2.3 STREET ADDRESS 5240 N BAY RD
2.4 CITY-ST-ZIP MIAMI BEACH FL 33140

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-3-96

CR2E034 (12/95)