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95 MAY -1 PM 12:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **N93000005399 (1)**

1. Corporation Name

BEAUTIFICATION OF LAKE LUCERNE, INC.

Principal Place of Business

Mailing Address

20800 NW 25 AVE
MIAMI FL 33056

20800 NW 25 AVE
MIAMI FL 33056

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/01/1993

3a. Date of Last Report

08/17/1994

4. FEI Number

65-0466186

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

\$68.75 Supplemental
Fee Not Required

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

OGDEN, LOUISE
20800 NW 25 AVE
MIAMI FL 33058

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 607.0502 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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P
NAME COGDELL, MARY
STREET ADDRESS 2341 N.W. 208 ST.
CITY - ST - ZIP MIAMI FL

11 TITLE Change Addition
12 NAME Change Addition
13 STREET ADDRESS Betty Weathers
14 CITY - ST - ZIP 2656 N.W. 204 ST
MIAMI, FL 33056

TITLE S
NAME TWIGGS-VEREEN, VEREE
STREET ADDRESS 20730 N.W. 25 AVE.
CITY - ST - ZIP MIAMI FL

21 TITLE Change Addition
22 NAME Change Addition
23 STREET ADDRESS Gerald Young
24 CITY - ST - ZIP 20625 N.W. 25 Ave.
MIAMI, FL 33056

TITLE T
NAME OGDEN, LOUISE
STREET ADDRESS 20800 N.W. 25 AVE..
CITY - ST - ZIP MIAMI FL

31 TITLE Change Addition
32 NAME Change Addition
33 STREET ADDRESS Humberto Cancio Jr.
34 CITY - ST - ZIP 20800 NW 25 Ave
MIAMI, FL 33056

TITLE BC
NAME JOHNSON, SHARON
STREET ADDRESS 20521 N.W. 22 CT.
CITY - ST - ZIP MIAMI FL

41 TITLE Change Addition
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP

TITLE BC
NAME YOUNG, GERALD
STREET ADDRESS 20825 N.W. 24 AVE.
CITY - ST - ZIP MIAMI FL

51 TITLE Change Addition
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP

TITLE BC
NAME ANDERSON, THEODORE
STREET ADDRESS 20420 N.W. 23 AVE.
CITY - ST - ZIP MIAMI FL

61 TITLE Change Addition
62 NAME
63 STREET ADDRESS
64 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 110.07(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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Louise Ogden/Louise Ogden*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/95 (305) 624-4887
Daytime Phone #