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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name L.A. MOSS, INC.

270588

(7)

FILED May 04 1998 8:00am Secretary of State



Suite, Apt # etc. Suite, Apt # etc. Suite, Apt # etc.	Principal Plan	a of Pusianon	Mailing Address	-				
### WILLYWOOD FL 30044938 ### WILLYWOOD FL 3004								
## DLI YWOOD FL 300444938 HOLI YWOOD FL 300444938 Date Incorporated or Dutrified GR/D4/1963 Substitute Desirous Substitute Substitute						DO NOT WRITE IN THIS SPACE		
2. Principal Place of Eusinoss 2. A. Mailing Address 2. Election Carpaign Financing 3. Suize, April 4 etc. 2. Country 3.			** = -**					
Suite, Apt. #, etc.								
Suite, Apt # etc. Suite, Apt # etc. Suite, Apt # etc.	2. Principal P	lace of Business	2a. Mailing Address				Appli	ied For
City & Slato Ci						59-1008845	Not Applicable	
28 Country 28 Country 29 30 Personal Proport Acaded to Pees Addition of Pees Personal Proport Acaded to Pees Addition of Pees Personal Proport Acaded to Pees	Sulte, Apt.	#, etc.	 	Suite, Apt. #, etc.		5. Certificate of Status Desired		
28 Trus Fance Contribution	:	e	City & State			6. Election Campaign Financing	\$5.00 м	av Be
S. Name and Address of Current Registered Agent FISKE, ALAN P. 6100 HOLLYWOOD BLVD SUITE 209 HOLLYWOOD FL 33024 621 632 633 634 635 636 636 637 637 637 637 638 638	23		28			Trust Fund Contribution		
Part Section Sections Sec		Country	Zip	\vdash	ry	8. This corporation owes or has paid the		gible
FISKÉ, ALAN P. 6100 HOLLYWOOD BLVD SURE 209 HOLLYWOOD FL 33024 62 Street Address (P.O. Box Number is Not Acceptable) 63 Street Address (P.O. Box Number is Not Acceptable) 64 City FL 85 Zip Code 65 Street Address (P.O. Box Number is Not Acceptable) 66 Street Address (P.O. Box Number is Not Acceptable) 67 FL 85 Zip Code 68 Street Address (P.O. Box Number is Not Acceptable) 68 Street Address (P.O. Box Number is Not Acceptable) 69 Street Address (P.O. Box Number is Not Acceptable) 69 Street Address (P.O. Box Number is Not Acceptable) 60 Street Address (P.O. Box Number is Not Acceptable) 60 Street Address (P.O. Box Number is Not Acceptable) 60 Street Address (P.O. Box Number is Not Acceptable) 60 Street Address (P.O. Box Number is Not Acceptable) 61 Street Address (P.O. Box Number is Not Acceptable) 62 Street Address (P.O. Box Number is Not Acceptable) 63 Street Address (P.O. Box Number is Not Acceptable) 64 City FL 85 Zip Code 65 Street Address (P.O. Box Number is Not Acceptable) 65 Street Address (P.O. Box Number is Not Acceptable) 66 Street Address (P.O. Box Number is Not Acceptable) 67 Street Address (P.O. Box Number is Not Acceptable) 68 Street Address (P.O. Box Number is Not Acceptable) 69 Street Address (P.O. Box Number is Not Acceptable) 69 Street Address (P.O. Box Number is Not Acceptable) 60 Street Address (P.O. Box Number is Not Acceptable) 60 Street Address (P.O. Box Number is Not Acceptable) 60 Street Address (P.O. Box Number is Not Acceptable) 60 Street Address (P.O. Box Number is Not Acceptable) 60 Street Address (P.O. Box Number is Not Acceptable) 61 Street Address (P.O. Box Number is Not Acceptable) 62 Street Address (P.O. Box Number is Not Acceptable) 63 Street Address (P.O. Box Number is Not Acceptable) 64 Street Address (P.O. Box Number is Not Acceptable) 65 Street Address (P.O. Box Number is Not Acceptable) 66 Street Address (P.O. Box Number is Not Acceptable) 67 S	24			30				No
STOR HOLLYWOOD BLVD SUITE 209 HOLLYWOOD FL 33024 82 Street Address (F.O. Box Number is Not Acceptable) 83 Zip Code 11. Pursuant to the provisions of Sections 607,0002 and 607,1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered applications again, or both, in this State of Footas, Such change was authorized by the corporation submits this statement for the purpose of changing its registered office or registered applications against a complete or registered applications against a complete or registered applications against a complete or registered office or registered applications against a complete against a complete or registered applications. The complete against a com			ent Registered Agent		41	10. Name and Address of New Registere	d Agent	
SUITE 209 HOLLWOOD FL 33024 11. Pursuant to the provisions of Sections 607.05.02 and 607.15.06. Florida Statutes. The above named comporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607.05.05. Florida Statutes. The above named comporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.05.05. Florida Statutes. SIGNATURE Signature, byred or prefer livered inspected agent and time if specialists. (MOIT Registered Agent agent and admin individuality of the purpose of changing its registered of directors. I hereby accept the appointment as registered of Statutes. Signature, byred or prefer livered inspected agent and time if specialists. (MOIT Registered Agent agent agent and after a prefer livered inspected agent agent and after individuality in the specialists. (MOIT Registered Agent ag				6	Name			
HOLLYWOOD FL 33024 B3				8:	2 Street Ad	dress (P.O. Box Number is Not Acceptable)		
11. Pursuant to the provisions of Sections 607.0002 and 607.1508, Florids Statutes. The above-named corporation submits this statement for the purpose of changing its registered office or registered coffice or registered powers as statement for the purpose of changing its registered powers of registered powers and registered powers and registered powers. In this coffice is a statement for the purpose of changing its registered powers and registered powers. In this coffice is a statement for registered powers in the registered powers and registered powers. In this coffice is a statement for registered powers in the registered powers. In this coffice is a statement power registered registered registered registered registered registered registered registered registered powers. P					•			
11. Pursuant to the provisions of Soctions 607.05.02 and 607.15.06. 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. Lam familiar with, and accept the obligations of, Soction 607.05.05. Florida Statutes SIGNATURE SI	п	JLL1WUUD PL 33024		•	"			
SIGNATURE Signature, typed or proted incred it ignored again and other its plaintable (NOT Registrated Again separature required when retreatming) DATE				84	4 City	F	85 Zip Co	de
SIGNATURE Signature, typed or proted incred it ignored again and other its plaintable (NOT Registrated Again separature required when retreatming) DATE	11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statu	tes, the abo	ve-named co	rporation submits this statement for the purpose	of changing its r	egistered
SIGNATURE Signature, typed or proted incred it ignored again and other its plaintable (NOT Registrated Again separature required when retreatming) DATE	office or r agent. I a	egistered age nt, or both, in the Stal m fam iliar with, and accept the obli	le of Florida. Such change was gations of, Section 607.0505, F	authorized t Iorida Statute	by the corporates.	ation's board of directors. I hereby accept the a	ppointment as re	gistered
Signature. Privated insured a long-steets again in act that deep depictable. Common		·	•					
TITLE P	SIGNATURE	Signature, typed or printed name of registered a	geni and tifle if applicable (NO	TF Registered A	gont signature req	uired when reinstating) DATE		
MOSS,SYLVIA K 8100 HOLLYWOOD BLVD 209 HOLLYWOOD FL 1.3 SIREET ADDRESS 1.4 CITY-ST-2/P STREET ADDRESS SIREET AD	12.	OFFICERS A	· · · · · · · · · · · · · · · · · · ·	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS	IN 12
STREET ADDRESS DITY-ST-JIPP HOLLYWOOD FL 1.3 STREET ADDRESS DITY-ST-JIPP HSKE, ALAN FISKE, ALAN 6100 HOLLYWOOD BLVD 209 HOLLYWOOD FL 22 NAME 5100 HOLLYWOOD BLVD 209 HOLLYWOOD FL 23 STREET ADDRESS DITY-ST-JIPP HOLLYWOOD FL 31 ITTLE 32 NAME 32 NAME 33 STREET ADDRESS DITY-ST-JIPP HOLLYWOOD FL 31 ITTLE 32 NAME 33 STREET ADDRESS DITY-ST-JIPP HOLLYWOOD FL 41 ITTLE 41 ITTLE 4 Change Addition Addition STREET ADDRESS DITY-ST-JIPP HOLLYWOOD FL 41 ITTLE 42 NAME 43 STREET ADDRESS DITY-ST-JIPP HOLLYWOOD FL 41 ITTLE 44 NAME 51 NEET ADDRESS A COTY-ST-JIPP HOLLYWOOD FL 43 STREET ADDRESS A COTY-ST-JIPP HOLLYWOOD FL 52 NAME 53 STREET ADDRESS A COTY-ST-JIPP HOLLYWOOD FL 53 NAME 54 STREET ADDRESS A COTY-ST-JIPP HOLLYWOOD FL 54 NAME 55 NAME 56 STREET ADDRESS 57 NAME 57 STREET ADDRESS 58 ACOTY-ST-JIP HOLLYWOOD FL 58 NAME 58 STREET ADDRESS 58 ACOTY-ST-JIP HOLLYWOOD FL 58 NAME 58 STREET ADDRESS 58 ACOTY-ST-JIP HOLLYWOOD FL 58 NAME 58 STREET ADDRESS 58 ACOTY-ST-JIP HOLLYWOOD FL 59 NAME 69 STREET ADDRESS 58 ACOTY-ST-JIP HOLLYWOOD FL 50 NAME 60 STREET ADDRESS 58 ACOTY-ST-JIP HOLLYWOOD FL 50 NAME 60 STREET ADDRESS 61 STREET ADDRESS 62 NAME 63 STREET ADDRESS 64 COTY-ST-JIP HOLLYWOOD FL 61 NITE 62 NAME 63 STREET ADDRESS 64 COTY-ST-JIP HOLLYWOOD FL 61 NITE 62 NAME 63 STREET ADDRESS 64 COTY-ST-JIP HOLLYWOOD FL 65 NITE 67 NOT STREET ADDRESS 65 NAME 65	TITLE	P	L DELETE	1.1 TiTLE			☐ Change [Addition
HOLLYWOOD FL 14 CITY-ST-ZIP TITLE SERET ADDRESS DITY-ST-ZIP TITLE SIREET ADDRESS DITY-ST-ZIP TITLE DELETE 21 TITLE 22 NAME 23 STREET ADDRESS DITY-ST-ZIP TITLE 34 CITY-ST-ZIP TITLE DELETE 31 TITLE Change Addition Additi	NAME			1.2 NAME	.			
INTLE SIRECT ADDRESS PHOLLYWOOD BLVD 209 HOLLYWOOD FL DELETE 21 TITLE 22 NAME 23 STRECT ADDRESS PHOLLYWOOD FL 31 TITLE 31 TITLE 33 NAME 33 STRECT ADDRESS DITY-ST-ZIP DELETE 34 CITY-ST-ZIP TITLE 41 TITLE 42 NAME 42 NAME 42 NAME 42 NAME 42 NAME 42 NAME 43 STRECT ADDRESS DITY-ST-ZIP TITLE 40 DELETE 41 TITLE 40 STRECT ADDRESS DITY-ST-ZIP TITLE 40 DELETE 51 TITLE 52 NAME 53 STRECT ADDRESS DITY-ST-ZIP TITLE 52 NAME 53 STRECT ADDRESS DITY-ST-ZIP TITLE 54 STRECT ADDRESS DITY-ST-ZIP TITLE 55 STRECT ADDRESS DITY-ST-ZIP TITLE 56 STRECT ADDRESS DITY-ST-ZIP TITLE	STREET ADDRESS		09	1.3 STREE	ET ADDRESS			
FISKE, ALAN 6100 HOLLYWOOD BLVD 209 HOLLYWOOD FL DELETE 31 TIME 32 NAME 33 STREET ADDRESS CITY-ST-ZIP DELETE 41 TIME 42 STREET ADDRESS CITY-ST-ZIP DELETE 41 TIME 42 STREET ADDRESS CITY-ST-ZIP TIME 43 STREET ADDRESS CITY-ST-ZIP TIME 44 STREET ADDRESS CITY-ST-ZIP TIME 52 NAME 53 STREET ADDRESS CITY-ST-ZIP TIME 53 STREET ADDRESS CITY-ST-ZIP TIME 54 STREET ADDRESS CITY-ST-ZIP TIME 55 NAME 56 STREET ADDRESS CITY-ST-ZIP TIME 56 NAME 57 STREET ADDRESS CITY-ST-ZIP TIME 57 STREET ADDRESS CITY-ST-ZIP TIME 58 STREET ADDRESS CITY-ST-ZIP TIME 59 STREET ADDRESS CIT	CITY-ST-ZIP			1.4 CITY-	ST-ZIP			
STREET ADDRESS CITY-ST-ZIP HOLLYWOOD FL 2.3 STREET ADDRESS CITY-ST-ZIP TITLE 3.1 TITLE 3.3 STREET ADDRESS CITY-ST-ZIP TITLE 3.4 CITY-ST-ZIP TITLE 3.4 CITY-ST-ZIP TITLE 3.5 STREET ADDRESS CITY-ST-ZIP TITLE 3.6 CITY-ST-ZIP TITLE 4.7 STREET ADDRESS CITY-ST-ZIP TITLE 4.8 STREET ADDRESS CITY-ST-ZIP TITLE 4.9 STREET ADDRESS CITY-ST-ZIP TITLE 4.0 Change Addition Add	TITLE		☐ DELETE	2.1 TITLE			Change [Addition
### HOLLYWOOD FL 2.4 CITY-ST-ZIP	NAME		••	2.2 NAME				
DELETE STREET ADDRESS CITY-ST-ZIP 34.CITY-ST-ZIP DELETE 41.111LE	STREET ADDRESS		09	2.3 STREE	ET ADDRESS			
STREET ADDRESS CITY-ST-ZIP TITLE DELETE 4.1 TITLE 4.2 NAME 4.2 NAME 4.3 STREET ADDRESS CITY-ST-ZIP DELETE 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition STREET ADDRESS CITY-ST-ZIP S.4 CITY-ST-ZIP Change Addition Change Ad	CITY-ST-ZIP	HOLLTWOOD FL		_				
STREET ADDRESS DITY-ST-ZIP DELETE 4.1 ITILE 4.2 NAME 4.2 NAME 4.3 STREET ADDRESS CITY-ST-ZIP TITLE 4.6 LITY-ST-ZIP DELETE 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS CITY-ST-ZIP DELETE 5.4 CITY-ST-ZIP DELETE 5.3 STREET ADDRESS CITY-ST-ZIP DELETE 5.4 CITY-ST-ZIP DELETE 5.5 NAME 5.3 STREET ADDRESS CITY-ST-ZIP DELETE 5.4 CITY-ST-ZIP DELETE 5.5 NAME 5.7 NAME 5.8 NAME 5.8 NAME 5.8 STREET ADDRESS CITY-ST-ZIP THE Change Addition AMA AMA 5.2 NAME 5.3 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP THE Change Addition AMA 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP A.1 I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 cath; that I am an officer or director of the corporation or the receiver or trustee enipowered to except this report as required by Chapter 607. Florida Statutes. In further certify that I am an officer or director of the corporation or trustee enipowered to except this report as required by Chapter 607. Florida Statutes: and that my name appears in	TITLE		☐ DELETE	3.1 TITLE			∐ Change [Addition
34. CITY-ST-ZIP DELETE 41 TITLE 4.2 NAME 4.2 NAME 4.3 STREET ADDRESS DITY-ST-ZIP TITLE DELETE 5.1 TITLE STREET ADDRESS DITY-ST-ZIP DELETE 5.1 TITLE STREET ADDRESS DITY-ST-ZIP DELETE 5.1 TITLE STREET ADDRESS DITY-ST-ZIP DELETE 6.1 TITLE STREET ADDRESS DITY-ST-ZIP DELETE 6.1 TITLE STREET ADDRESS DITY-ST-ZIP DELETE 6.1 TITLE STREET ADDRESS DITY-ST-ZIP 14. 1 hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 onth; that 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 mane appears in	NAME			3.2 NAME				
DELETE 4.1 TITLE	STREET ADDRESS			3.3 STREE	ET ADDRESS			
AAME STREET ADDRESS CITY-ST-ZIP DELETE DELETE S.1 TITLE DELETE S.2 NAME STREET ADDRESS CITY-ST-ZIP DELETE S.3 STREET ADDRESS STREE	CITY-ST-ZIP							
STREET ADDRESS CITY-ST-ZIP DELETE 5.1 TITLE Change Addition 5.2 NAME STREET ADDRESS CITY-ST-ZIP DELETE 5.3 STREET ADDRESS CITY-ST-ZIP DELETE 6.1 TITLE Change Addition Addition DELETE 6.1 TITLE Change Addition Addit	TITLE		☐ DELETE				L_f Change [Addition
A 4 CITY-ST-ZIP DELETE S.1 TITLE Change Addition	NAME							
DELETE 5.1 TITLE	STREET ADDRESS							
STREET ADDRESS CITY-ST-ZIP DELETE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP Change Addition 6.2 NAME 6.2 NAME 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP 1.4 I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 opporation or the receiver or trusted emplowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in	CITY-ST-ZIP		Drift.					1.2.20
STREET ADDRESS S.3 STREET ADDRESS S.4 CITY-SI-ZIP S.4 CITY-SI-ZIP STREET ADDRESS S.4 CITY-SI-ZIP STREET ADDRESS S.4 CITY-SI-ZIP STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS S.3 STREET ADDRESS STREET AD			☐ DECE1E				LI Unange L	Addition
STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.2 NAME 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP 6.5 NAME 6.5 NAME 6.7 NAME 6.8 STREET ADDRESS 6.9 CITY-ST-ZIP 6.9 Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in	NAME							
DELETE 6.1 TITLE G.2 NAME 6.2 NAME 6.3 STREET ADDRESS CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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								
6.2 NAME 6.3 STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 6.1 hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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	CITY-ST-ZIP		DELETE				Observe	Application -
63 STREET ADDRESS (ACTY-ST-ZIP) 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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			☐ DETEIF				∟, ∪nange L	Addition
ATY-\$1-ZIP 4. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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	1	•						
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in		}.			l l			
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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in	CITY-ST-ZIP					0	Take all the second	
officer or director of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in	indicated	on this annual report or supplemen	tal annual report is true and ac	curate and the	hat my signat	ture shall have the same legal effect as if made	under oath: that I	am an
Block 12 or Block 13 if changed, or on an attachment with an address.	officer or o	director of the corporation or the red	ceiver or trustee empowered to	execute this	report as re	quired by Chapter 607, Florida Statutes; and the	it my name appea	ars in