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 # 343769

(6)

LORRAINE BOOTERY, INC.

FILED May 20 1997 8:00am Secretary of State

LUKKAI	AE DOO!	ENT, INC.														
Principal Place	e of Busines	§	Ma	iling Address				$\neg \neg$		I DIÇEN di va e 1814		FROM DIDA		Elēli Ji		
247 MIRACLE A CORAL GABLES				MIRACLE MILE RAL GABLES FL 33134	1-5907											
									3. Date In 03/28	corporated of 1969	or Qualified		of La 05/199		oort	
2. Principal Place of Business			2a.	2a, Mailing Address					4. FEI Number					Applied For		
21			26						59-1269409					Not Applicable		
Suite, Apt. #, etc.			27	Suite, Apt. #, etc.				5. Certificate of Status D			Desired	\$8.75 Additiona Fee Required				
City & State				Cily & State				6. Election Campa			- •	\$5.00 May Be				
23 Country			28	ZIP COU					Trust Fund Contribution				Added to Fees			
Zip		Country		zψ		untry		-		-	s liability for in		itax und ∏ No	er s. 1	199.032,	
24		25 and Address of C	29 Surrent Begist	ered Agent	30	1				Statutes	s of New Reg					-{
- 247	irara, an Miracle i	DRES-OF AL	·			81 82 83 84		MAI Address	NRAP	A, AL	FRE ∞ Not Acceptab	E.	JR	Zip Co	ode	
agent. I ar SIGNATURE	m familiar wi Z	ions of Sections 60 cont, or both, in the in and accept the	obligations of	07.1508, Florida Statu la Such change was Section 607.0505, Fl	orida St	atutes),		ation submit is board of		nent for the preeby accep		changi pointmen	ng its t as re	registered egistered	
12.			RS AND DIREC		13						ES TO OFFIC	ERS AND	DIREC	TORS	IN 12	<u>ا</u>
TITLE	V			DELETE		INCE							Char		Addition) (0)
NAME	MANRARA, ANDRES G.			1.2 N			i									2
STREET ADDRESS	247 MJB/	VECE MILE			1.3	STREET	ADDRESS									ľ
CITY-ST-ZIP	CORAL (ABLES FL			1.4	CITY-S	1- <i>2</i> (P									12
TITLE	P			☐ DELETE	2.1	TILLE	7						Chai	nge	Addition	٦٥
NAME		a, alfredo e.,	JR.		2.2	NAME	Į									
STREET ADDRESS		ACLE MILE			23	STREE1	ADDRESS		•							
CITY-ST-ZIP		SABLES FL				CHY-S	31- 7 1P					· · · · · · · · · · · · · · · · · · ·				_
TITLE	VD	A 1111 0 45		DELETE.		TITLE							Cha	nge	Addition	י [
NAME	MANKAK	A, LUIS G.			3.2	NAME	.									1
STREET ADDRESS		TOLE MILE			3.3	STREE1	ADDRESS									
CITY-ST-ZIP		BABLES FL				CHIY-S	ST-ZIP								—	_
TITLE	ST	A. ALBERTO G		DELETE.		TITLE							Char	эде	□ Addition	'
NAME	MANKAK	A AUDENTO G				NAME										
STREET ADDRESS	24/ MIN	VELE MILE BABLES, FL 000	1 0		1		ADDRESS									-
CITY-SY-ZIP	CUMAL	ANDLES, PL UUU	JU	T AFLETE		CI1Y - S	I - ZIP						1 0		T La care	4
TITLE				☐ DELETE		TITLE							Chai	ige	Addition	' ∤
NAME						NAME										
STREET ADDRESS							ADDRESS									
CITY-ST-ZIP		 		Porter		CITY - S	IT-ZIP	ļ <u></u>							1 4 2 202	4
TITLE				DELETE		TITLE							Cha	тре	Addition	' [
NAME						NAME										
STREET ADDRESS							ADDRESS									
CITY-ST-ZIP			. C. d. W. S.		6.4	CITY-S	1 - ZIP		- 	6 65/0///		 .				_

14. I do 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 Block 12 or Block 13 if changed, or on an attachment with an address.

11/24/27

1205) 448-7911