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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Feb 06 1997 8:00am

Secretary of State

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Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 430063

CO1Y-\$1-ZIP

SIGNATURE:

(8)

LAND PLANNING - INVESTIGATION, INC.

										A FARA ROTI
Principal Place of Business Mailing Address							e restri minne iznir enter datih milbe iili	ı Miğil Biğil	BJRdt BJØ19 MINI	I BIBLI TOBI
1700 SANS SO NORTH MIAMI			1700 SANS SOUCI BLVD. NORTH MIAMI FL 33181-3206							
							3. Date Incorporated or Qualified 07/05/1973		ate of Last R	teport
2. Principal Place of Business 21			2a. Mailing Address 26				4. FEI Number Applied For 59-1497327 Not Applicable			
Suite, Apt #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional Fee Regulred			
City & State)	Cit	y & State				Election Campaign Financing Trust Fund Contribution		\$5.00	May Be
<i>Z</i> ₁ p	Country		Zip Country			••••••••	Trust Fund Contribution			
24	25 29 30		⊢ −−]		Florida Statutes Yes No				
	9. Name and Address of Curre	nt Registere	d Agent				10. Name and Address of New Re	gistered	Agent	
RES	S, LEWIS M.			1	81	Name				
1700 SANS SOUCI BLVD. NORTH MIAMI FL 33181					82	Street Addre	ress (P.O. Box Number is Not Acceptable)			
				ļ	83					
				1		City	-	FL	. ` `	Code
11. Pursuant to office or re agent. Far		02 and 607.1 e of Florida gations of Sc	1508, Fiorida Statu Such change was ection 607,0505, F	ites, the ab authorized Iorida Statu	ove-i by t ites.	named corpo the corporation	oration submits this statement for the p on's board of directors. I hereby accep	orpose o	f changing it ointment as	ts registered registered
SIGNATURE	Lewis M. Ress Signature, typed or printed name of registered ag	internal in a disease	ation the 7400	Tt. Danistarad	4		d when reinstating)	/27/	9.7	
12.	OFFICERS AN			13.	Agent	signature require	ADDITIONS/CHANGES TO OFFIC	UPTIL		20 IN 19
TITLE	P		DELETE	1.1 TITL	LE		ADDITIONS OF INTEGER TO OTTE	LIO AIL	Change	Addition
NAMC	RESS, LEWIS M.			1.2 NAN			•			
STREET ADDRESS	1700 SANS SOUCI BLVD. NORTH MIAMI FL			1.3 \$TR	REET AL	DDRESS				
CHY-SI-ZO THE	S S		DELETE	1.4 CIT		ZIP			Change	Addition
NAME	RESS, ESTA B.			2.1 IIIL					Change	Addition
STREET ADDRESS	1700 SANS SOUCI BLVD.					DDRESS				
CITY-ST-ZIF	NORTH MIAMI FL		DECE TO	2. 4 CIT		- ZIP		······································		
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NAME				3.2 NAA						
STREET ADDRESS				3.3 STR	REET AL	DDRESS				
CITY-ST-ZIP			DECEST.	3.4. CIT		- ZIP			1 2	
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NAME				4, 2 NA	ME	:				
STREET ADDRESS						DDRESS				
CITY-ST-ZIF		·	Druzze	4.4 CITY		ZIP				1 1 200
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NAME				5.2 NAA		1				
STREET ADDRESS				5.3 STR	EET AL	DDRESS				
CITY-ST-ZIF	Committee of the second of the		Dri Pre	5.4 CITY		ZIP			: 1716	1 1 2 2 2 2 2
TOTAL			☐ DELETE	6.1 T(T)					Change	Addition
NAME				6.2 NAN						
STREET ADDRESS				6.3 STR	REET AL	DDRESS	•			

6.4 CITY - ST - ZIP

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 angual 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 of rustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block