

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # 443030 (2)  
1. Corporation Name  
L.R.P., INC.



Principal Place of Business  
6301 BISCAYNE BLVD  
#214  
MIAMI FL 33138

Mailing Address  
PO BOX 370647  
MIAMI FL 33138

3. Date Incorporated or Qualified 12/31/1973  
3a. Date of Last Report 05/01/1995

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	59-1583099	Not Applicable
22 City & State	27 City & State	5. Certificate of Status Desired	\$8.75 Additional Fee Required
23 Zip	28 Zip	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24 Country	29 Country	8. This corporation has liability for intangible tax under s 199.032, Florida Statutes	<input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent

BIRMELIN, ROBERT C  
6301 BISCAYNE BLVD #214  
MIAMI FL 33138

10. Name and Address of New Registered Agent

81 Name PHILIP S. BIRMELIN  
82 Street Address (P.O. Box Number is Not Acceptable)  
6301 Biscayne Blvd #214  
83  
84 City Miami FL 85 Zip Code 33138

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 *Philip S. Birmelin* (NOTE: Registered Agent signature required when reinstating) DATE 4-24-96

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	VD
NAME	BIRMELIN, ROBERT C	1.2 NAME	BIRMELIN, ROBERT C.
STREET ADDRESS	905 NW 51 STREET	1.3 STREET ADDRESS	6082 Vista Linda Lane
CITY-ST-ZIP	POMPANO BEACH FL 33064	1.4 CITY-ST-ZIP	Boca Raton, FL 33433
TITLE	SD	2.1 TITLE	SD
NAME	BIRMELIN, REGINA C	2.2 NAME	Birmelin, Regina C.
STREET ADDRESS	905 NW 51 STREET	2.3 STREET ADDRESS	6082 Vista Linda Lane
CITY-ST-ZIP	POMPANO BEACH FL 33064	2.4 CITY-ST-ZIP	Boca Raton, FL 33433
TITLE	TD	3.1 TITLE	
NAME	BIRMELIN, ROBERT C JR	3.2 NAME	
STREET ADDRESS	6082 VISTA LINDA LANE	3.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL	3.4 CITY-ST-ZIP	
TITLE	VD	4.1 TITLE	PD
NAME	BIRMELIN, PHILIP S	4.2 NAME	Birmelin, Philip S.
STREET ADDRESS	6082 VISTA LINDA LANE	4.3 STREET ADDRESS	6082 Vista Linda Lane
CITY-ST-ZIP	BOCA RATON FL	4.4 CITY-ST-ZIP	Boca Raton, FL 33433
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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: *Philip S. Birmelin* 4-24-96 305 754-1691  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (12/95)