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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # 456436

1. Corporation Name

LAKE FRONT PROPERTY INVESTMENT, INC.

Principal Place of Business Mailing Address					
108 EAST CENTRAL BOULEVARD 108 EAST CENTRAL BOULEVARD			D		
ORLANDO FL 3	2801-2408	ORLANDO FL 32801-2408			DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualifed
					07/03/1974
_ =	(2)	G. Marillan Address			4. FEI Number Applied For
	ace of Business	2a. Mailing Address			59-2885710 Not Applicable
21		26 Suite And the ste			\$8.75 Additional
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired Fee Required
22		City & Charte			
City & State	9	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
23		28	Country		
Zip	Country	H "	Country		8. This corporation owes the current year Intangible  Personal Property Tax.
24	25	29 30	1		Personal Property Tax.
	9. Name and Address of Current	Registered Agent	81	Name	
MOE	WAN IOHN CII		01	Name	
MCEWAN, JOHN S II			82	Street /	Address (P.O. Box Number is Not Acceptable)
% SANDERS,MCEWAN,MARTINEZ, ET.AL.					
	EAST CENTRAL BLVD.		83		
OKD	ANDO FL 32801		84	City	■ 85 Zip Code
					FL
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: Regis	tered Ager	nt signature re	required when reinstating) DAYE
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	KWOK, BENJAMIN	1	1.2 NAME	j	
STREET ADDRESS	48MACDONNELLRD,APT7-B		1 3 STREET	ADDRESS	5
CITY-ST-ZIP	HONG KONG 00000	/	1.4 CITY-5"	T-ZIP	
TITLE	D		2.1 TITLE		☐ Change ☐ Addition
NAME	GOCK, GABRIEL		2.2 NAME		
	1000 NORTH POINT #608			TADORESS	
STREET ADDRESS	SAN FRANCISCO, CA 0		2. 4 CITY-S		· -
CITY-ST-ZIP			2. 4 CITT-3 3.1 TITLE	1-21	☐ Change ☐ Addition
TITLE	DA MAN CHO	_	3.2 NAME		
NAME	KWOK, MAN CHO			r ADDDCCO	
STREET ADDRESS	8-B BOWEN RD 16TH FL			T ADDRESS	
CITY-ST-ZIP	HONG KONG 00000		3.4. CITY-S	T-ZIP	Change Addition
TITLE	PD	_	4.1 TITLE		Change
NAME	KWOK, PHILIP	•	4, 2 NAME		
STREET ADDRESS	43 REPULSE BAY ROAD	4	4.3 STREET	T ADDRESS	
CITY-ST-ZIP	HONG KONG 00000		4.4 CITY-S	T-ZIP	
TITLE			5.1 TITLE	Ì	☐ Change ☐ Addition
NAME		<b>]</b> ;	5.2 NAME		
STREET ADDRESS		<b>.</b>	5.3 STREE	TADDRESS	<b>5</b>
CITY-ST-ZIP		1:	5.4 CITY-S	T-ZIP	
TITLE		☐ DELETE (	6.1 TITLE		☐ Change ☐ Addition
					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 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, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

or SIGNING OFFICER OR DIRECTOR

29th January, 1999.

Daytime Phone #

**FILED** 

Mar 02, 1999 8:00 am Secretary of State

03-02-1999 90006 020 \*\*\*150.00