

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

PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996-1296

B-6814-C

DOCUMENT # 516957

(8)

1. Corporation Name

LANG ENTERPRISES, INC.



Principal Place of Business

12614 NORTH KENDALL DRIVE
MIAMI FL 33186

Mailing Address

12614 NORTH KENDALL DRIVE
MIAMI FL 33186

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

10/21/1976

3a. Date of Last Report

06/30/1995

4. FEI Number

59-1698152

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 193.032,
Florida Statutes

☒ Yes

☐ No

10. Name and Address of New Registered Agent

LANG, RAY
12614 N. KENDALL DRIVE
MIAMI FL 33186

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 607.0605, Florida Statutes.

SIGNATURE

Signature (typed or printed name of signing officer or director)

DATE

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ DELETE
PD	LANG, RAY	12614 NORTH KENDALL DR	MIAMI FL	
VP	LANG, TERESA	12614 NORTH KENDALL DR	MIAMI FL	
D	LANG, TERESA	12614 NORTH KENDALL DR	MIAMI FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY-ST-ZIP	☐ Change	☐ Addition
1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY-ST-ZIP		
2. TITLE	3. NAME	4. STREET ADDRESS	5. CITY-ST-ZIP		
3. TITLE	4. NAME	5. STREET ADDRESS	6. CITY-ST-ZIP		
4. TITLE	5. NAME	6. STREET ADDRESS	7. CITY-ST-ZIP		
5. TITLE	6. NAME	7. STREET ADDRESS	8. CITY-ST-ZIP		
6. TITLE	7. NAME	8. STREET ADDRESS	9. CITY-ST-ZIP		
7. TITLE	8. NAME	9. STREET ADDRESS	10. 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 unchanged, or on an attached sheet with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/6/96

(305) 595-2010

CR2E034 (12/95)