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

CORPORATION ANNUAL REPORT



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

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1. Corporation Name

**DOCUMENT #** 

646311

(1)

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LA	ĽΨ	AAI		INC.

LAZOWICK.	INC.				_					
Principal Place of Bus	Principal Place of Business Mailing Address			1 140110 BINJ Grace dires mies ware ifer sient eren einen aben aren anen anen anen anen						
7301 S.W. 6TH STREET PLANTATION FL 33317			7301 S.W. 6TH STREET PLANTATION FL 33317							
		FORMINIO	PORNIATION PL 35517			3. Date Incorporated or Qualified	3a. Da	ite of Last Rep	ort	
							11/27/1979	1	04/18/1995	<u> </u>
		2a. Mailing A	ddress				11/27/1979 4. FEI Number		Ar	plied For
2. Principal Place of	Business	26	100.000				59-1953119			ot Applicable
1		Suite, Ac	ot # etc				5. Certificate of Status Desired			Additional
Suite, Apt. #, etc.		27	, , , , o.o.				5. Certificate of Ctates Desires			equired
City & State		City & St	tate				Election Campaign Financing     Trust Fund Contribution			May Be to Fees
3		28		Countr			8. This corporation has liability fo	r intangible	tax under s	199.032,
Zip	Country	Zφ	<u> </u>	Country	у		Florida Statutes Ye	ıs ∐No		
4	25	29		30			10. Name and Address of New	Registere	d Agent	
9.	Name and Address of Cui	rent Registered Ag	ent	B1	iT	Name				
					1		CO. C. Alember in Not Accept	able)		
LAZOWICK S	LAZOWICK, STEWART		82	2	Street Addr	dress (P.O. Box Number is Not Acceptable)				
				8:	+					
7301 S.W. 6TH STREET PLANTATION FL 33317				0.	٦				12-1 7-	Code
PLANTANON	116 00011			8	4	City		F	EL  85   Zip	C006
							estion submite this statement for the C		1	gistered off
11. Pursuant to the or registered ag familiar with, an	provisions of Sections 607.0 gent, or both, in the State of id accept the obligations of,	0502 and 607.1508, F Florida. Such change Section 607.0505, Flo	Florida Statutes was authorized orida Statutes.	s, the above d by the co	rpc	oration's txoa	ration submits this statement for the pard of directors. I hereby accept the ap	opòintmen	t as régistered	agent. I am
SIGNATURE			(NOIT)	F: Registered A	aeni	t signature requin	ud when reinstating)	DAT		
Signati	ure, typed or printed name of registered	AND DIRECTORS		13.	_		ADDITIONS/CHANGES TO C	FFICERS	AND DIRECTO	RS IN 12
_12		AND DIFFEORER	T DELETE	1. 1 7171	LE				☐ Change	Additio
	70 <u> </u>	_		1.2 NAM	AE	ļ				
	AZOWICK, STEWART			1.3 STR	EET	ADDRESS				
	301 S.W. 6TH STREET			1.4 CiTY	Y - S	ST-71P				
City - ST - ZIP	LANTATION FL		) DELETE	2 1 111	_				Change	☐ Additio
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NAME						1 ADDRESS				
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CHY-ST-ZIP			DELETE	3 1 111					☐ Change	Addition
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NAME						ET ADORESS				
STREET ADDRESS				\$ 3. 31		CI ADDIRECT				

64 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 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 certify 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.

3.4 CITY - ST - ZIP

4.4 CITY - ST - ZIP

5.4 CITY - ST - ZIP

6.3 STREET ADDRESS

4. 1 TITLE

42 NAME 4.3 STREET ADDRESS

5 1 TITLE

5.2 NAME 5 3 STREET ADDRESS

6 1 TITLE

6.2 NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

CHY-ST-ZIP

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TITLE

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