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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 655729

(2)

LAKE WORTH ROAD CORPORATION

Principal Place of Business	Mailing Address
4000 S. 57TH AVE., #204 GREENACRES FL 33463	4000 S. 57TH AVE #204 GREENACRES FL 33463-4307

## FILED Mar 13 1997 8:00am Secretary of State



									3. Date Incorporated or Qualified   3a. Date of Last Report   02/13/1980   05/29/1996						
2. Principat Place of Business					2a. Mailing Address					4. FEI Number		plied For			
21					26					59-1995814	No	Not Applicable			
Suite, Apt. #. etc.			27	Suite Apt. #, etc.					5. Certificate of Status Desired \$8.75 Additions Fee Required						
Cit	y & State			(	City & State					6. Election Campaign Financing \$5.00 May Be					
23										Trust Fund Contribution Added to Fees					
Zη	)	Country Zip Cou					ountry		8. This corporation has liability for intangible tax under s. 199.032,						
24		25 29 30							Florida Statutes						
Name and Address of Current Registered Agent							-			10. Name and Address of New Re	gistered A	gent			
CORPCO, INC.							81	81 Name							
	2699 S	BAYSHO	re dr				82	82 Street Address (P.O. Box Number is Not Acceptable)							
	SUITE ?	700-A													
		FL 33133					83								
							84	City		100	FL	<b>85</b> Zip	Code		
o a	ffice or regis gent. Lam fa	stered age	nt, or both, in the S	itate of Florida	7.1508, Florida Statut a. Such change was a Section 607.0505, Flo	authori.	zed by	the con	corpor poration	ration submits this statement for the p n's board of directors. I hereby accep	ourpose of o	changing it intment as	s registered registered		
SIGN	ATURE	ature, typed or	printed name of registers	d agont and title if	applicable (NOT	E Regise	ered Age	nt signature	required	when reinstating)	DATE				
12.			OF LICERS	AND DIRECT	FORS	13	3.	`		ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTOR	S IN 12		
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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 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 enjoyeered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, much an attachment with all address

**SIGNATURE:** 

SIGNATURE AND TYPES OF PRINTED HAME FIGURING OFFICER OR DIRECTOR

3/10/97 561-439-2800