FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 APR 17 AM 11:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DOCUMENT # 650005

1. Corporation Name
L I Z ENTERPRISES INC

Principal Place of Business
500 N.E Spanish River H28A
Boca Raton
Florida 33431

Mailing Address

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 3/5/84
3a. Date of Last Report: 1994

2. Principal Place of Business
21

2a. Mailing Address
26 500 N.E. SPANISH R.VER

Suite, Apt. #, etc.
22

Suite, Apt. #, etc.
27 H28A

City & State
23

City & State
28 BOCA RATON, FL

Zip: 24 | Country: 25

Zip: 29 31431 | Country: 30 U.S.A

4. FEI Number: 59-1989065 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. *This corporation has liability for intangible tax under S. 199.032, Florida Statutes* ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

ZENAIDA ARCIA
11770 W. GOLF DR
MIAMI, FL 33167

10. Name and Address of New Registered Agent

81 Name: EUGENE J. SADKOWSKI
82 Street Address (P.O. Box Number is Not Acceptable): 500 N.E. SPANISH R.VER
83 H28A
84 City: BOCA RATON FL 85 Zip Code: 33431

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: Eugene Sadkowski — Eugene Sadkowski — 3/07/95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PRESIDENT	11 TITLE	☐ Change ☐ Addition
NAME	MICHAEL MONTRICHARD	12 NAME	
STREET ADDRESS	500 N.E. SPANISH RIVER #H28A	13 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON, FL 33431	14 CITY-ST-ZIP	
TITLE	VITTO	21 TITLE	☐ Change ☐ Addition
NAME	Elizabeth Montrichard	22 NAME	
STREET ADDRESS	500 N.E Spanish River H 28A	23 STREET ADDRESS	
CITY-ST-ZIP	Boca Raton, FL. 33431	24 CITY-ST-ZIP	
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		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 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: Michael Montrichard — March 27, 1995 — 407 368 1773
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #