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PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **857497** **(2)**

1. Corporation Name

LAND INDUSTRIES, INC.

Principal Place of Business	Mailing Address
10422 NW 31ST TERRACE UNITE 18 MIAMI FL 33172	P.O. BOX 521147 MIAMI FL 33152

3. Date Incorporated or Qualified: **08/23/1983**

3a. Date of Last Report: **02/21/1995**

4. FEI Number: **52-0907545** ☐ 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

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

ISZLER, JAMES WM
3752 ALCANTARA AVE
MIAMI FL 33178

10. Name and Address of New Registered Agent

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 607.1508, 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 I accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: JAMES WM ISZLER MAR 7/96
(Type or print name of person signing) (Date)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PSD	☐ DELETE	1.1 TITLE		☒ Change ☐ Addition
NAME	ISZLER, JAMES		1.2 NAME		
STREET ADDRESS	7230 NW 32ND ST		1.3 STREET ADDRESS	10422 NW 31ST TER UNIT 18	
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP	MIAMI FL 33172	
TITLE	TD	☐ DELETE	2.1 TITLE		☒ Change ☐ Addition
NAME	URIBE, ENRIQUE		2.2 NAME		
STREET ADDRESS	7230 NW 32ND ST		2.3 STREET ADDRESS	10422 NW 31ST TER UNIT 18	
CITY-ST-ZIP	MIAMI FL		2.4 CITY-ST-ZIP	MIAMI FL 33172	
TITLE	D	☐ DELETE	3.1 TITLE		☒ Change ☐ Addition
NAME	HAMBURG, MICHAEL		3.2 NAME		
STREET ADDRESS	7230 NW 32ND ST		3.3 STREET ADDRESS	10422 NW 31ST TER UNIT 18	
CITY-ST-ZIP	MIAMI FL		3.4 CITY-ST-ZIP	MIAMI FL 33172	
TITLE	D	☐ DELETE	4.1 TITLE		☒ Change ☐ Addition
NAME	URIBE, JUAN CAMILO		4.2 NAME		
STREET ADDRESS	7230 N.W. 32ND ST.		4.3 STREET ADDRESS	10422 NW 31ST TER UNIT 18	
CITY-ST-ZIP	MIAMI FL		4.4 CITY-ST-ZIP	MIAMI FL 33172	
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (12/95)

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)(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.

SIGNATURE: JAMES WM ISZLER MAR 7/96 305 594-2260
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #