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

DOCUMENT # F93000004279 (6)

95 MAY -1 PM 9:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Corporation Name
L.V.F. ENTERPRISES, INC.

Principal Place of Business	Mailing Address
234 PINE HOV CIRCLE, #B-2 GREENACRES FL 33463	234 PINE HOV CIRCLE, #B-2 GREENACRES FL 33463

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/21/1993
3a. Date of Last Report: 01/27/1994

2. Principal Place of Business	2a. Mailing Address
21 7777 CEDAR HURST CT.	26 7777 CEDAR HURST CT.
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 LAKE WORTH, FL	28 LAKE WORTH, FL
24 Zip 33467 / 25 Country	29 Zip 33467 / 30 Country

4. FEI Number: 65-0432349 ☐ 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

FRIEDMAN, LAUREN
234 PINE HOV CIRCLE, #B-2
GREENACRES FL 33463

10. Name and Address of New Registered Agent

81 Name: LOREN FRIEDMAN
82 Street Address (P.O. Box Number is Not Acceptable): 7777 CEDAR HURST COURT
83
84 City: LAKE WORTH FL 85 Zip Code: 33467

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: [Signature of New Registered Agent, if changed] [Signature of Registered Agent, if changed, otherwise] DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PC	11 TITLE	PC ☒ Change ☐ Addition
NAME	FRIEDMAN, LAUREN	12 NAME	LOREN FRIEDMAN
STREET ADDRESS	234 PINE HOV CIRCLE, #B-2	13 STREET ADDRESS	7777 CEDAR HURST COURT
CITY ST ZIP	GREENACRES FL 33463	14 CITY ST ZIP	LAKE WORTH, FL 33467
TITLE		21 TITLE	☐ Change ☐ Addition
NAME		22 NAME	
STREET ADDRESS		23 STREET ADDRESS	
CITY ST ZIP		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)(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 attached sheet with an address.

SIGNATURE: [signature] 5/1/95

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Telephone Number

0271923 CP