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**Mar 09, 1999 8:00 am**  
**Secretary of State**

03-09-1999 90028 027 \*\*\*150.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # F97000002062

1. Corporation Name  
 LUCAS INTERNATIONAL, LTD., CO.



Principal Place of Business Mailing Address  
 700 CANAL STREET 4440 PGA BLVD Suite 306  
 STAMFORD CT 06902 PALM BEACH GARDENS, FL.  
 33410

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2a. Mailing Address  
 21 700 CANAL ST. STAMFORD CT 06902 26 4440 PGA BLVD. SUITE 306  
 Suite, Apt. #, etc. 27 PALM BEACH GARDENS, FL.  
 22 306  
 City & State 28 Palm Beach Gardens FL  
 23 Palm Beach Gardens FL  
 Zip Country 29 33418 30  
 24 33418 25 33418

3. Date Incorporated or Qualified  
 04/21/1997  
 4. FEI Number  
 06-1203809 Applied For  
 Not Applicable  
 5. Certificate of Status Desired  \$8.75 Additional Fee Required  
 6. Election Campaign Financing  \$5.00 May Be Added to Fees  
 Trust Fund Contribution  
 8. This corporation owes the current year Intangible Personal Property Tax.  Yes  No

9. Name and Address of Current Registered Agent  
 LUCAS, RICHARD J  
 479 PRESTWICK CIRCLE - 1004 GRAND ISLE WAY  
 PALM BEACH GARDENS FL 33418

10. Name and Address of New Registered Agent  
 81 Name  
 Lucas, Richard J.  
 82 Street Address (P.O. Box Number is Not Acceptable)  
 1004 Grand Isle Way  
 83  
 84 City  
 Palm Beach Gardens FL 85 Zip Code  
 33418

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 \_\_\_\_\_ DATE \_\_\_\_\_  
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS	
TITLE	PC <input type="checkbox"/> DELETE
NAME	LUCAS, RICHARD J
STREET ADDRESS	479 PRESTWICK CIRCLE 1004 GRAND ISLE WAY
CITY-ST-ZIP	PALM BEACH GARDENS FL 33418
TITLE	ST <input type="checkbox"/> DELETE
NAME	KALIL, DAVID T
STREET ADDRESS	111 SHANNON DRIVE
CITY-ST-ZIP	PITTSBURGH PA 15238
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	1004 Grand Isle Way
1.4 CITY-ST-ZIP	Palm Beach Gardens FL 33418
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I 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 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, with all other like empowered.

SIGNATURE: Richard J. Lucas DATE: 2/23/99  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone # 562 630-0010

CR2E034 (11/98)