1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # F98000002429

LA BENDICION GP. INC.

FILED Feb 01, 1999 8:00am **Secretary of State**

02-01-1999 90008 013 ***150.00



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|--|--|---|---|---|--|--|----------------------|
| Principal Plac | e of Business | Mailing Address | | | | | 1818 11848 1844 1881 |
| 4510 OLD FIELD DRIVE GAINESVILLE VA 22065 4510 OLD FIELD DRIVE GAINESVILLE VA 22065 | | | | | | | |
| | | | | | DO NOT WRITE IN THIS SPACE | | |
| | • | | | | 3. Date Incorporated or Qualifed | | ٠, |
| • p: 115 | N | 2a. Mailing Address | | | 04/29/1998 4. FEI Number | -::- | Applied For |
| \neg | lace of Business | 26. Walling Address | | | 54-1890369 | - | Not Applicable |
| Suite, Apt. | #. etc. | Suite, Apt. #, etc. | | | | \$8.7 | 5 Additional |
| 22 | | 27 | | | 5. Certifcate of Status Desired | Fee | Required |
| City & Stat | te . | City & State | | | 6. Election Campaign Financing | | 00 May Be |
| 23 | | 28 | | | Trust Fund Contribution | Add | ed to Fees |
| Zip | Country | Zip | Cou | ntry | 8. This corporation owes the curr | ent year Intangible | □No |
| 24 | 25 | 29 | 30 | | Personal Property Tax. 10. Name and Address of New I | | 2140 |
| | 9. Name and Address of Current | t Registered Agent | | 81 Name | 10. Name and Address of New I | registered Agent | |
| LIND | ERWOOD, ROBERT L | مروا كد - المؤلمين - في أرسيه المهاد | | | | | |
| 537 EAST PARK AVENUE | | | | 82 Street Add | Iress (P.O. Box Number is Not Accept | able) | |
| | LAHASSEE FL 32301 | | | 83 | A 174 F 1 4 4 5 1 1 1 1 | | 74 103 H 155 |
| | | | • | 24 5" | | 11 (4) 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | ip Code |
| | | | | 84 City | | FL 85 2 | .ip Code |
| SIGNATURE | Signature, typed or printed name of registered agen | at and title if applicable. (NOTI | E: Registered | Agent signature requir | ed when reinstating): (()) ADDITIONS/CHANGES TO OF | DATE STORES | CTOPS IN 12 |
| 12. | | D DIRECTORS | 13. 1,1 T | n. | | Char | |
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| | V | ☐ DELETE | 1.4 CI | TREET ADDRESS TY-ST-ZIP TLE | 20 • X 77 • 22 | | |
| STREET ADDRESS | V UNDERWOOD, ROBERT L | ☐ DELETE | 1.4 CI 2.1 TI 2.2 N | TREET ADDRESS TY-ST-ZIP TLE | 20 × 20 7 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 | | |
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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