FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Jan 31 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G03516

(3)

LAKES INVESTMENT CORP.

											DEN FIER O	AR BHAN BIRN	
Principal Place of Business Mailing Address									i lautet Batt anten entet ater	11 31814 3111		nic minte dinte	#1#11 1 4 #1
1401 PONE DE LEON BLVD #202 CORAL GABLES FL 33134			1401 PONE DE LEON BLVD #202 CORAL GABLES FL 33134-4080										
								3.	Date Incorporated or C 10/07/1982	valified		te of Last F 5/1996	leport
2. Principal Place of Business				2a. Mailing Address 26				4.	FEI Number 59-2205402				pplied For ot Applicable
Suite, Apt #, etc				Suite, Apt. #, etc.				-			P		Additional
22				27				6.	Certificate of Status De	sired			equired
City & State				City & State				6.	Election Campaign Fina	ncino		\$5.00	May Be
23			28					Trust Fund Contribution					
Zip Country			7	Zip Country			1	8. This corporation has liability for intangible tax under					i. 199.032,
24	25			29 30			Florida Statutes						
		Address of Current	Registe	red Agent		ļ <u>.</u> .	r-::	10.	Name and Address of	New Re	gistered A	<u>igent</u>	
	NCO, JORGE E					81	Name						
1401 PONCE DE LEON BLVD #202 CORAL GABLES FL 33134							Street Add	address (P.O. Box Number is Not Acceptable)					
OON	rt Grotto i t	W104				83				***************************************			
							O.4.					7657 7:-	Ondo
						84	'				FL		Code
11. Pursuant soffice or reagent 1 a	to the provisions o egistered agent, o m familiar with, ar	of Sections 607.0502 or both, in the State of accept the obliga	and 607 of Florida tions of,	7.1508, Florida Stat I. Such change wa: Section 607.0505, I	utes, the a s authorize Florida Sta	bovi d by tute:	e-named corp the corpora s.	poratio ition's t	n submits this statement coard of directors. I here	for the poby accer	urpose of ot the appo	changing i pintment as	ts registered ; registered
SIGNATURE							 				DATE	·	
	Signature, typed or print	of FICERS AND			OTE Registere	d Age	ent signature requ		ADDITIONS/CHANGES	TO OFFIC		DIRECTO	DC IN 12
12.	P	OFFICE NO ANI.	DINEGI	DELETE	1,1 T	ITt F	T	<i>-</i>	ADDITIONS/CHANGES	OFFIC	ENS AND	Change	Addition
NAME	MIER, ARSEN	10			1.2 N								
STREET ADDRESS	PANADERAS						ADDRESS						
CITY-ST-ZIP	PALENCIA, SI				1		ST-ZIP						
TITLE	S			DELETE	2.1 T) i - EII					Change	Addition
NAME	BLANCO, JOF	RGE E.			2.2 N							•	
STREET ADDRESS	MAN DONCE DE LEON BLVD			2.3 5			ADDRESS						
CITY-ST-ZIP CORAL GABLES FL.						2. 4 CITY - ST - ZIP							
TITLE	V			☐ DELETE	3.1 T					·····		Change	Addition
NAME	MIER, MARIA	TERESA			3.2 N	AME							
STREET ADORESS	PANADERAS	#1, 3B			3.3 S	TREET	ADDRESS						
CITY-ST-ZIP	PALENCIA, SI	PAIN			3.4. 0	CITY -	ST-ZIP						
TITLE	T			☐ DELETE	4.1 7	ITLE						☐ Change	Addition
NAME	MIER, MARIA				4.21	VAME							
STREET ADDRESS	PANADERAS				4.3 S	TREE1	T ADDRESS						
CITY-ST-ZIP	PALENCIA SP	•			4.4 C	ATY-S	ST-ZIP						
TITLE				DELETE	5.1 T	ITLE						Change	Addition
NAME					5.2 N	AME				•			
STREET ADDRESS					5.3 \$	TREET	T ADDRESS						
CITY-ST-ZIP					5.40	iΤΥ-5	ST-ZIP						
THILE				☐ DELETE	6.1 T	ITLE						Change	Addition
NAME					62 N	IAME							
STREET ADDRESS					635	TREET	T ADDRESS						

14. If do 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.