

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

FILED
Feb 18 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # G33204 (0)
 1. Corporation Name
LEMPAL ENTERPRISES, INC.



Principal Place of Business Mailing Address
% RAUL E. PALACIOS
2800 OLD ORCHARD RD
DAVIE FL 33328
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 2810 Old Orchard Road
 Suite, Apt. #, etc.
22 Davie, Florida
 City & State
23 Davie, Florida
 City & State
24 33328 Zip **25 USA** Country
26 2810 Old Orchard Road
 Suite, Apt. #, etc.
27 Davie, Florida
 City & State
28 Davie, Florida
 City & State
29 33328 Zip **30 USA** Country

3. Date Incorporated or Qualified
04/14/1983
 4. FEI Number
59-2278018
 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 owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent
PALACIOS, RAUL E.
2800 OLD ORCHARD RD
DAVIE FL 33328

10. Name and Address of New Registered Agent
81 Name Manning, Roger L.
82 Street Address (P.O. Box Number is Not Acceptable) 2810 Old Orchard Road
83
84 City David FL 85 Zip Code 33328

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]* DATE **x 2-11-98**

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	MANNING, ROGER L.	
STREET ADDRESS	2810 OLD ORCHARD RD	
CITY-ST-ZIP	DAVIE FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	MANNING, MONIQUE A.	
STREET ADDRESS	2810 OLD ORCHARD RD	
CITY-ST-ZIP	DAVIE FL	
TITLE	SDP	<input checked="" type="checkbox"/> DELETE
NAME	PALACIOS, RAUL E	
STREET ADDRESS	2800 OLD ORCHARD RD	
CITY-ST-ZIP	DAVIE FL	
TITLE	TD	<input checked="" type="checkbox"/> DELETE
NAME	PALACIOS, ELSA M.	
STREET ADDRESS	2800 OLD ORCHARD RD	
CITY-ST-ZIP	DAVIE FL	
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 type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	Secretary/Treasurer	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Manning, Monique A.	
2.3 STREET ADDRESS	2810 Old Orchard Road	
2.4 CITY-ST-ZIP	Davie, FL 33328	
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.

SIGNATURE: *[Signature]* DATE: **x 2/11/98** **954 476 0226**

CR2E034 (10/97)