

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
Jul 30, 1999 8:00 am
Secretary of State

07-30-1999 90009 037 ***150.00

DOCUMENT # **G43229**

1. Corporation Name

LAKEHURST, INC.

Principal Place of Business
**1939 JEFFERSON ST. #204
HOLLYWOOD FL 33020-5445**

Mailing Address
**1939 JEFFERSON ST. #204
HOLLYWOOD FL 33020-5445**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/10/1983

2. Principal Place of Business

21

2a. Mailing Address

26

4. FEI Number

59-2335431

Applied For

Not Applicable

Suite, Apt. #, etc.

22

Suite, Apt. #, etc.

27

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

City & State

23

City & State

28

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

Zip

24

Country

25

Zip

29

Country

30

8. This corporation owes the current year
Intangible Personal Property.

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**JENSEN, ROBERT
1939 JEFFERSON ST. #204
HOLLYWOOD FL 33020-5445**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **DP** ☐ DELETE
NAME **JENSEN, ROBERT**
STREET ADDRESS **1939 JEFFERSON ST. #204**
CITY-ST-ZIP **HOLLYWOOD FL 33020**

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ 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 for on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Aug 4/24/99 954-432-4300

CR2E034 (5/99)

599175-90009-37
643229



RUN AWAY TRAVEL

8910 Miramar Parkway - Suite 106 - Miramar FL 33025-4187

Tel. (954) 432-4300 Fax. (954) 432-4915

July 18, 1999

Division of Corporations

Annual Report Filings

P.O. Box 1500

Tallahassee, FL 32302-1500

Gentlemen,

On the 13th of this month, I placed a **STOP PAYMENT ORDER** on my check #2864 in the amount of \$150.00 which was issued on April 29, 1999 and mailed the same date. As this check has not as yet been paid, I must assume that it is either lost by the Post Office or misplaced somewhere within your organization. On the 29th of April, when I was mailing my corporate report I notice that I did not have my report to put into the envelope. (It is possible that the report was somehow mailed to IRS, for which I also mailed documents on that date) As I did not want the check to be late, I mailed it without the form feeling that it was more important to pay the fee than to hold back the entire package. I had thought that sometime between then and now someone would contact me from your office and ask for the form. That has not happened.

I have recently received a **SECOND NOTICE** which brought all of this back to the surface. I think that it could be possible that the check, without the form, could have been received and might be somewhere in your lost and found area (if you have one)

I am enclosing with this **SECOND NOTICE** a new check in the amount of \$150.00 to replace the original check and report and hope that you would honor the fact that this was, in fact, mailed to you in a timely manner and was somehow not received.

If there is any further information that I might be able to provide to you please do not hesitate to contact me.

Thanking you for your attention, I am

Most sincerely,
LAKEHURST INC.

Robert E. Jensen
President