2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H48292 1. Entity Name LAGO MAR DEVELOPMENT CORPORATION Principal Place of Business Mailing Address

FILED Apr 10, 2000 8:00 am Secretary of State

04-10-2000 90086 045 ***150.00

			Maining Address										
% WALTER L. BANKS 1700 S. OCEAN LANE FT. LAUDERDALE FL 33316-3705			% WALTER L. BANKS 1700 S. OCEAN LANE FT. LAUDERDALE FL 33316-3705				1 *881 6 11 8 111		12 010 (0 12 0 4)	e) ala li 478()	MININ NORTH (12 0 11 0 1017 100	ı
2. Principal Place of Business		- ;	3. Mailing Address										
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Zip	Cou	intry	Zip	Coun	try	5 . C	Certificate of	Status De	esired		8.75 A ee Requi	dditional	
	6 Name and A	ddress of Current Re	nistered Anent	1	<u> </u>	7. N	lame and A	ddress o	f New Re		· · · · · · · · · · · · · · · · · · ·		\dashv
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	KS, WALTER L.				Street Addr	ress (P.O. Bo	ox Number is	s Not Acc	eptable)	<u></u>			\dashv
) S. OCEAN LANE LAUDERDALE FL	5											\dashv
					City					FL	Zip Co	ode	
8 The above	named entity subm	nits this statement for th	e purpose of changing its	registere	ed office or rec	gistered age	ent, or both,	in the Sta	te of Flori	da.			
o. The above	Harried Critity 300m	ing this statement for the	o purposo or origing no	, regiotor		g.0.0.00 ag.	5,11,1 O						
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SIGNATURE _	Signature, typed or printed	d name of registered agent and	title if applicable. (NOT	E: Registere	d Agent signature re	equired when rei	instating)			DATÉ			
This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.			FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of St				10. Electi	on Camp	aign Fina	ncing	\$5.	.00 мау в	
	•							Fund Cor	ntribution.			ed to Fees	se
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indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR