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



FILE NUW. FILING FEE AFTEN MAI 1 13 \$300.00								Apr 03 1997 8:00am				
PROFIT FLORIDA DEPARTI CORPORATION Sandra 8,												
ANNUAL REPORT Secretary o								Secretar	y ot	Sta	ite	
•	1997	155	DIVISION OF C	ORPOR	ATIO	NS						
DOCU	MENT # H4931 7	7	(1)				7					
1. Corporation	i Name	,	111									
LAMMS	CHINA, INC.						-	t englikis dent migte kahan besät espet engli	idir Brain Bibat	BLOK EIRH E		
Principal Place		-	Address					t (6858); Bill Bible 16180 11181 11911 1881 1	HERE BLUEN WEBST	#1011 W1W11 #	HER ISEL	
C/O ANNE A. MEYER 3901 SE ST. LUCIE BLVD., #52 C/O ANNE A. MEYER 3901 SE ST. LUCIE BLVD., #52							}					
STUART FL 34997 STUART FL 34997-6155							3	3. Date incorporated or Qualified 38. Date of Last Report				1
								03/27/1985	01/29			
· ·	ace of Business	2a. Maile 26	ing Address				4	FEI Number 49-2521140		——————————————————————————————————————	plied For of Applicable	{
Suite, Apt.	# etc.		e, Apt. #, etc.			· — · · · · · · · · · · · · · · · · · ·	-	Certificate of Status Desired		\$8.75	Additional	1
22		27	& State							Fee Re	- 	}
City & State	:	28	o otate				6	Election Campaign Financing Trust Fund Contribution		\$5.00 Added 1		
Zip	Country	Zip			intry		В	This corporation has liability for in			. 199.032,	}
24	25] 9. Name and Address of Curre	29 ont Registered	Agent	30	<u> </u>		10	Florida Statutes Yes No 10. Name and Address of New Registered Agent				
	ER, ANNE A.				B1	Name						
3901 #52	SE ST. LUCIE BLVD.				82	Street Add	dress (P.O. Box Number is Not Acceptab	le)	······································		
	ART FL 33494				83							1
1					84	City		 		85 Zip (Code	
11. Pursuant	to the provisions of Sections 607.05	02 and 607.15	08. Florida Statut	es, the a	bove	-named cor	rporatio	on submits this statement for the p	FL urpose of c	nanging it	s registered	1
office or r agent. La	to the provisions of Sections 607.05 egistered agent, or both, in the Stati m farmiar with, and accept the oblic	e of Florida. Su gations of, Sec	uch change was a tion 607.0505, Fk	authorize orida Sta	d by lutes	the corpora	átion's	board of directors. I hereby accep	t the appoir	itment as	registered	
SIGNATURE	Signature Appeal or ported needed legistered no					ni signature requ			DATE		·	ł
12.	OFFICERS AN	ND DIRECTOR	S	13.				ADDITIONS/CHANGES TO OFFIC	ERS AND D			90/0
TITLE	D Meyer, sue M.		☐ DELETE	1.1 11		{			L	J Change	Addition	9
NAME STREET ADDIESS	3901 SE ST. LUCIE BLVD.				1.2 NAME 1.3 STREET ADDRESS							6
C(TY+S*_Z)P	STUART FL				1,4 CITY-ST-ZIP			,		7 01	770.66	Ş
Infl.	d Meyer, William A.	[] DELETE			2.1 TITLE 2.2 NAME				L	_i Change	Addition	1
NAME STREET ADDRESS	26 BIRCH DRIVE				2.3 STREET ADDRESS							
CITY - ST-2IP	MT. KISCO NY		Driese		SITY-S	T-ZIP				T Chan	Addition	-
TITLE NAME	D Meyer, Joanne A.				3.1 TITLE 3.2 NAME				<u>L</u>	_ Change	Mudilion	
STREET ADDRESS	RUSSEL AVE., P.O. BOX 55	SSEL AVE., P.O. BOX 55			3.3 STREET ADDRESS							
CITY ST ZIF	RHINECUFF NY		DELETE		HTY-S	T-ZIP				Change	Addition	1
Totle NAME	D Burton, Laura Meyer		CT DECEIE	41 T	IAME	1			_	•	Monitori	
STREET ADDRESS	12 WILLOW STREET		•			ADDRESS		क्षेत्र	18.5 Tel: [18.	734 P		
CITY-SI-709	BEACON NY				ITY-S	1-ZIP		·		Change	Addition	1
TITLE NAMÉ	D Meyer, Margaret C.		□ percic	5.1 TITLI 5.2 NAM					L.	T Avende	E. FOURIOR	
STREET ADORESS	136 DEANN ST.					ADDRESS						
CITY - \$1 - Zi?	COPPELL TX		DELETE	5.4 C 6.1 T	TV-S	1-21P				Change	Addition	-
TITLE NAME	DP MEYER, ANNE A.		C) MILLIE	6.2 N						⊒ oungide	Addition .	
STREET ADORESS	3901 SE ST. LUCIE BLVD.			•		ADDRESS						
CITY-ST-ZIP	STUART FL by certify that the information supplies	ied with this fili	ng does not quali	64 C	TY-S	r-ziP [ed in S	ection 119.07(3)(i). Florida Statute	s. I further o	ertify that	the	1
	The second secon					وحلف لمحدث معادد	A	مسوا مسمد مباه منتقط المباد مدراه مسا		سن ماسمس	Alleria and Alberta	

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 oat tam 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:

FILED

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