SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT
1995

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

APPROVED AND FILED

95 JUL -6 AM 8:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # J02931 (0)

1. Corporation Name
LAKESIDE REGENT, INC.

Principal Place of Business	Mailing Address
408 MARINER DR. JUPITER FL 33477	408 MARINER DR. JUPITER FL 33477

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/07/1986
3a. Date of Last Report: 04/12/1994

2. Principal Place of Business
21 c/o Paul Gifford ESQ
22 400 North Andrews Suite 102
23 Ft Lauderdale FL
24 33301 25 Broward

2a. Mailing Address
26 c/o Paul Gifford ESQ
27 400 North Andrews Suite 102
28 Ft Lauderdale
29 33301 30 US

4. FEI Number: 59-2646421 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. [illegible] ☐ **$5.00** May Be Added to Fees

8. This corporation has been, for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
HORWITZ, LANNY A
408 MARINER DR.
JUPITER FL 33477

10. Name and Address of New Registered Agent
81 Name: Paul Gifford ESQ.
82 Street Address (P.O. Box Number is Not Acceptable): 400 North Andrews Suite 102
83
84 City: Ft Lauderdale FL 85 ZipCode: 33301

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] Paul Gifford 6/28/95
(If Registered Agent signature required) DATE

12. OFFICERS AND DIRECTORS	13.	
D SAX, CARL A 120 E. 87TH STREET, APT. 20PA NEW YORK NY 10128	1 TITLE 2 NAME 3 STREET ADDRESS 4 CITY ST ZIP	☐ Change ☐ Addition
D HORWITZ, LANNY A 408 MARINER DR. JUPITER FL 33477	1 TITLE 2 NAME 3 STREET ADDRESS 4 CITY ST ZIP	☐ Change ☐ Addition
	1 TITLE 2 NAME 3 STREET ADDRESS 4 CITY ST ZIP	☐ Change ☐ Addition
	1 TITLE 2 NAME 3 STREET ADDRESS 4 CITY ST ZIP	☐ Change ☐ Addition
	1 TITLE 2 NAME 3 STREET ADDRESS 4 CITY ST ZIP	☐ Change ☐ Addition
	1 TITLE 2 NAME 3 STREET ADDRESS 4 CITY ST ZIP	☐ Change ☐ Addition

14. (Optional) I hereby certify that the information supplied with this filing is voluntarily furnished and 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 added by an attachment with an address.

SIGNATURE: [signature] LANNY A. HORWITZ VP 6/28/95 407 575 4884
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Daytime Phone #

CR2E034 (3/95)

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