

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
Jun 20 1996 8:00 am
Secretary of State

DOCUMENT # J57825 (8)
1. Corporation Name
L & M MANUFACTURING CORP.



Principal Place of Business Mailing Address
% JACK LIEBERMAN
380 N.E. 191 ST.
MIAMI FL 33179

3. Date Incorporated or Qualified 02/17/1987
3a. Date of Last Report 04/11/1995
4. FEI Number 59-2786208
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 has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Zip
24 Country 25 Country 29 Country 30 Country

9. Name and Address of Current Registered Agent

LIEBERMAN, JACK
380 N.E. 191 ST.
MIAMI FL 33179

10. Name and Address of New Registered Agent

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 firm, if applicable

(NOTE: Registered Agent's signature required when renouncing.)

DATE

12. OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY-STATE-ZIP
PD LIEBERMAN, JACK 2431 NE 201 ST MIAMI FL
VPD LIEBERMAN MARILYN 2431 NE 201 ST MIAMI FL
DELETE
DELETE
DELETE
DELETE
DELETE
DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-STATE-ZIP
21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-STATE-ZIP
31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-STATE-ZIP
41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-STATE-ZIP
51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-STATE-ZIP
61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-STATE-ZIP

14. I do 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)(k), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/17/96 954-657-3885

CR2E034 (3/96)