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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT #

(7)

L & H INVESTMENT GROUP, INC.

FILED Jan 14 1997 8:00am Secretary of State



Principa Place of Business		Mailing Address	Mailing Address			- I KRONILE CHII EDDIA YORKI YORKI EHERD KINI BIRAL BADAN DIDAN DIGAN DIDAN BARKI HORK			
11912 MANDARIN RD. JACKSONVILLE FL 32223		JACKSONVILLE FL	11912 MANDARIN ROAD JACKSONVILLE FL 32223-1364						
		U\$			_	3. Date Incorporated or Qualified 06/25/1987		ate of Last /19/1990	
Principal P	ace of Business	28. Mailing Addres	SS			4. FEI Number			Applied For
1		26				59-2696281			Not Applicable
Suite, Apt	#, etc	Suite, Apt. #, ε	eto.			5. Certificate of Status Desired			Additional Required
City & Stat	le:	City & State		······		6. Election Campaign Financing		\$5.0	O May Be
<u> </u>	- · · · ·	28				Trust Fund Contribution		Adde	d to Fees
Zip]	Country	Ζp	├	untry		8. This corporation has liability for	intangible []] Yes [s. 199.032,
L	25 9. Name and Address of Currer	29 nt Registered Agent	30	1		Florida Statutes L 10. Name and Address of New Re			
RO	THSTEIN, SIMON D			81 Na	ime				
	17 BEACH BOULEVARD			62 St	ent Address	s (P.O. Box Number is Not Acceptal	blo)		
	OWARD BUILDING SUITE #104			02	eer Address	s (1:0. box Number is Not Acceptal	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
JAC	CKSONVILLE FL 32207			83					
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	To the provisions of Sections 607 050			<u> </u>			<u> </u>	.	
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From the early deating that the lines resident as the lines are lines resident in section 113.070,000, From a statutes. Truth it certify that the information indicated on this armual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that ham an efficient or director of the corporation or the receiver or trustee employeed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 or bringed, or on an attact the with an address.

SIGNATURE:

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