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PROFIT
CORPORATION
ANNUAL REPORT
1998

DOCUMENT #
1. Corporation Name
FLORIDA L & M ENT

FLORIDA DEPARTMENT OF STATE

Sandra B. Morthem

Secretary of State
 DIVISION OF CORPORATIONS

(5)

FILED May 07 1998 8:00am Secretary of State

Principal Place of Business ** CLARENCE M. MCCLINTOCK 1273 N. HARBOR DR RIVERIERA BEACH FL 33404 **CLARENCE M. MCCLINTOCK 1273 N. HARBOR DR RIVERIERA BEACH FL 33404 **DO NOT WRITE IN THIS SPACE **3. Date Incorporated or Qualified 07/02/1987 **2. Principal Place of Business **2. Mailing Address **2. Mailing Address **2. Mailing Address **2. Mailing Address **3. Date Incorporated or Qualified 07/02/1987 **4. FEI Number 65-0033962 **Not Applicable Suite, Apt. #, etc. **2. Suite, Apt. #, etc. **2. Certificate of Status Desired **5. Certificate of Statu	FLORI	DA L & M ENTERPRIZES I	NC.							
1273 N. HARBOR DR RIVERIERA BEACH FL 33404 RIVERIERA BEACH FL 33404 2. Principal Place of Business 2. Mailing Address 2. Mailing Address 2. Mailing Address 3. Date incorporated or Qualified 07/02/1987 2. Principal Place of Business 2. Mailing Address 3. Date incorporated or Qualified 07/02/1987 4. FEI Number 65-0033962	Principal Place of Business Mailing Address							i Militt Ailbir Ailbir Ailbir (Mai		
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27 City & State Country Country Country Country Country Country Country Country Added to Fees Trust Fund Contribution Added to Fees Trust Fund Contribution Added to Fees Trust Fund Contribution Added to Fees Trust Fund Contribution Added to Fees Added to Fees Added to Fees This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No 9. Name and Address of Current Registered Agent MCUNTOCK, CLARENCE M. 1273 N. HARBOR DR RIVERA BEACH FL 33404 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 City FL 85 Zip Code The Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statules. SIGNATURE Signature, tyred or pentad name of registered and into 4 applicable. (NOTE: Registered Agent signature reculted when reinstating) DATE	2. Principal F	Place of Business					••) ``		
Trust Fund Contribution Added to Fees Zip Country Jip Country 8. This corporation owes or has paid the current year Inlangible Personal Property Tax due June 30. Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent MCUNTOCK, CLARENCE M. 1273 N. HARBOR DR RIMERA BEACH FL 33404 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 Vip 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 agent. or both, in the State of Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. am farmiliar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or pented name of registered agent and trile of agridicable. (NOTE: Registered Agent signature required when reinstaling) DATE	Suite, Apt. #, etc.			 -			5. Certificate of Status Desired	~		
28 29 30 Personal Property Tax due June 30. Yes No 9. Name and Address of Current Registered Agent MCUNTOCK, CLARENCE M. 1273 N. HARBOR DR RIMERA BEACH FL 33404 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 Represent 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 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, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or pentled name of registered agent and trife if applicable. (NOTE: Registered Agent signature required when reinstaling): DATE	City & State		<u>⊢</u>			, , , , , , , , , , , , , , , , , , ,				
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	SIGNATURE									
	12							DIRECTORS IN 12		

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SIGNATURE											
	Signature, typed or ponted name of regulared agent and title if applicable	[NOTE: R	Registered Agent signature required when reinstating) DATE								
12.	OFFICERS AND DIRECTORS DELETE		13.	ADDITIONS/CHANGES TO OFFICERS							
TITLE		DEFEIF	1.1 TITLE		L Change	Addition					
NAME	MCCLINTOCK, CLARENCE M.	į	1.2 NAME								
STREET ADDRESS	1273 N. HARBOR DR		1.3 STREET ADDRESS								
CITY - ST - ZIP	RIVIERA BEACH FL		1.4 CITY+ST-ZIP								
TITLE		DELETE	2.1 TITLE	PRESIDENT,	Change	☐ Addition					
NAME	MCLINTOCK, LUCILLE D.		2.2 NAME	PRESIDENT MECLIN tock Lucilli 1273 N HARBOR DR	ED						
STREET ADDRESS	1273 N. HARBOR DR		2.3 STREET ADDRESS	1273 TI HARBOR DR							
CITY - ST - ZIP	RIMERA BEACH FL		2.4 CITY-ST-ZIP	RIVIERA BEACH 71 3	3404						
TITLE		DELETE	31 TITLE		Change	Addition					
NAME			3.2 NAME								
STREET ADDRESS			3.3 STREET ADDRESS								
CITY-ST-ZIP			3.4. CITY-ST-ZIP								
TITLE		DELETE	4.1 TITLE		☐ Change	☐ Addition					
NAME			4, 2 NAME			Į.					
STREET ADDRESS			4.3 STREET ADDRESS								
CITY-ST-ZIP			4.4 CITY-ST-ZIP								
TITLE		DELETE	5 1 TITLE		Change	Addition					
NAME			5.2 NAME								
STREET ADDRESS			5.3 STREET ADDRESS			j					
CITY-ST-2IP			5.4 CITY+ST-ZIP			_ 					
TITLE		DELETE	61 TITLE		☐ Change	Addition					
NAME			6.2 NAME								
STREET ADDRESS			6.3 STREET ADDRESS			ļ					
CITY-ST-ZIP			6.4 CITY-ST-ZIP	0.000							

14. I hereby certify that the information supplied with this filing 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 or an attachment with an address?

SIGNATURE TI- Chiloch Lucille &