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PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

J92283 **DOCUMENT #**

(7)

THE LAUREN GROUP, INC.

Principal Place of Business

Mailing Address

APPROVED AND FILED

96 JAN 22 PH 1: 29

SECRETARY OF STATE TALLAHASSEE, FLORIDA



2111 OCEAN STUART FL US		STUART FL 34996 US					
					3. Date Incorporated or Qualified 09/11/1987	3a. Date of t 05/0	_ast Report 1/1995
l. Prinopal Pla	ice of Business	2a. Mailing Address 26			4. FEI Number 59-2844468	· · · · · · · · · · · · · · · · · · ·	Applied For Not Applicable
Suite, Apt. #	· · · · · · · · · · · · · · · · · · ·	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$	8.75 Additional Fee Required
City & State	· · · · · · · · · · · · · · · · · · ·	City & State			Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
- Ziр 	Country 25	7(p 29	30 Cour	itry			
	9. Name and Address of Curre	ent Registered Agent		81 Name	10. Name and Address of New R	egistered Age	nt
7110144	0 1555DEV 5 500			81 Name			
	S, JEFFREY F. ESO.			82 Street Add	dress (P.O. Box Number is Not Acceptab	le)	
	EDERAL HWY STE 209 FL 34994		-	63		 	
:				84 City		8	5 Zip Code
Expressional to	o the provisions of Continue 607 056	00 and 607 1500 Fire of Charles			oxation submits this statement for the pur	FL	1
 or registere 	ed agent, or both, in the State of Flo b, and accept the obligations of, Sec	rida. Such change was authoriz	ed by the c	orporation's boa	ard of directors. Thereby accept the appo	pose of changir pintment as regi	ig its registered onld stered agent. I am
BNATURE ,	Signature: typed or printed han a of registered age				red when redistation)	DATE	
			DTE. Registered a	lgent signature require		DATE	
·		ND DIRECTORS	DTE. Registered a	agont signature require	ADDITIONS/CHANGES TO OFFI		ECTORS IN 12
	OFFICERS AI				ADDITIONS/CHANGES TO OFFI	ICERS AND DIR	nange [7] Addition
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LE MR. RELEADURESS Y-ST-Z/P LE MR. RELEADORESS Y-ST-Z/P LE MR. RELEADORESS Y-ST-Z/P LE MR. RELEADORESS Y-ST-Z/P LE MR. MR. RELEADORESS Y-ST-Z/P LE MR.	OFFICERS AID D WARD, THOMAS M. 2358 DEEPWOOD PASS PALM CITY FL D WARD, SUSANN B. 2358 DEEPWOOD PASS	ND DIRECTORS DELETE DELETE	13. 1 1 Til 1 2 NAI 1 3 SIF 1 4 CIT 2 1 TII 2 2 NAI 2 3 SIF 2 4 CIT 3 1 TII 3 2 NAI 3 3 STI 3 4 CIT	LE ME	ADDITIONS/CHANGES TO OFF	CERS AND DIR C	Addition
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LOSSICO M. Walk THOMAS M. WARD 1/15/96
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR.
Devine Proces SIGNATURE