

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # K28869 (1)

1. Corporation Name

LANSTEK, INC.



Principal Place of Business

8038 WINTHROP DRIVE
8038 WINTHROP DRIVE
PORT RICHEY FL 34668
US

Mailing Address

8038 WINTHROP DRIVE
PORT RICHEY FL 34668
US

3. Date Incorporated or Qualified
07/14/1988

3a. Date of Last Report
04/14/1995

2. Principal Place of Business

21 2897 Wildwood Cir.

Suite, Apt. #, etc.

22

City & State

23 MARIONA FL

Zip

24 32448

Country

25 USA

2a. Mailing Address

26 2897 Wildwood Cir.

Suite, Apt. #, etc.

27

City & State

28 MARIONA FL

Zip

29 32448

Country

30 USA

4. FEI Number
59-2900863

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

9. Name and Address of Current Registered Agent

LAWRENCE, RICHARD H.
8038 WINTHROP DRIVE
PORT RICHEY FL 34668

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

2897 Wildwood Cir.

83

84 City

MARIONA

FL

85 Zip Code

32448

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 of officer or director of corporation

☐ Signature of registered agent

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME LAWRENCE, RICHARD H.
STREET ADDRESS 8038 WINTHROP DR.
CITY-ST-ZIP PORT RICHEY FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Richard H. Lawrence

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RICHARD H. LAWRENCE

8/3/96 (904) 526-4460

DATE

TELEPHONE

CR2E034 (12/95)