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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996 DOCUMENT #

K33093

(1)

LANTANA LINERS, INC.									
Principal Place of Business Mailing Address * JEFFREY A. BURGER 7549 HAZELWOOD CIRCLE LAKE WORTH FL 33467 Mailing Address * JEFFREY A. BURGER 7549 HAZELWOOD CIRCLE LAKE WORTH FL 33467			RCLE			3. Date incorporated or Qualified 3a. Date of Last Report			
						09/14/1988	1	1/26/199	•
2. Principal Pla	ace of Business	2a. Mailing Address				4. FEI Number	.1 -		Applied For
21 26						00 000 100 1		lot Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.						5. Certificate of Status Desired	atus Desired S8.75 Additional		
22 27 27 27 27 27 27 27 27 27 27 27 27 2						Fee Required			
Gity & State	City & State	/ & State			6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees				
23 Zip	Country	Zip	Co	untry	,	8. This corporation has liability for	intangible ta		
24	25	29	30	·			∐ No		
	9. Name and Address of Curr	rent Registered Agent				10. Name and Address of New F	egistered	Agent	
				81	Name				
Burger, Jeffrey A.				82	Street Add	dress (P.O. Box Number is Not Acceptat	ile)		
	AZELWOOD CIRCLE			-	ļ <u> </u>				
LAKE W	ORTH FL 33467			83	}				
				84	City		FI	85 Zip	Code
44 Durawanti	to the previous of Sections 607.05	502 and 607 1508 Florida Statu	ites the ah	OVE	named coro	oration submits this statement for the pu	roose of ch	angino its r	eaistered office
or register	ed agent, or both, in the State of Fl	forida. Such change was author	ized by the	corp	oration's bo	ard of directors. Thereby accept the app	ointment as	registered	agent. I am
familiar wi	th, and accept the obligations of, S	section 607.0505, Florida Statute	es.						
SIGNATURE .	Signature, typed or printed name of registered a	ogent and title it applicable. (f	VOIL Registers	od Ager	nt signature requi	red when reinstating)	DATE		
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFF	ICERS AND	DIRECTO	RS IN 12
TITLE	DP	☐ DELETE	DELETE 1.11				l	Change	☐ Addition
NAME	BURGER, JEFFREY A.	Y A.		1.2 NAME 1.3 STREET ADDRESS					l
STREET ADDRESS	6044 86 TRAIL S		1.3						ı
CITY-ST-7IP	LAKE WORTH FL		1.4 CITY					Channa	C) Addition
TITLE	DT	☐ DELETE	2. 1 1(1)					Change	Addition
NAME		Dorrocki, Eccent II.		2 2 NAME					
STREET ADDRESS	0077 00 11942 0			2 3 STREET ADDRESS 2 4 CITY - ST - ZIP					
CITY-S1-ZIP	LAKE WORTH FL			TITLE	S1-ZIP			Change	Addition
THTLE	DS RUDGED DUTH A			NAME					
NAME STREET ADDRESS	6044 86 TRAIL S		ı		ET ADDRESS				
CITY-ST-ZIP	LAKE WORTH FL		3.4 CITY						
TITLE		☐ DELETE		TITLE				Change	☐ Addition
NAME			4.2	NAME					
STREET ADDRESS			4.3	STREE	T ADDRESS				
CITY OF TID	!		. 44	CITY-	ST-ZIP				F
CITY - ST - ZIP	<u> </u>				ı			☐ Change	Add-tion
TITLE		☐ DELETE		TITLE				L Change	
		DEFEIE	52	NAME				[Criange	
TITLE		DEFELE	5.2 5.3	name Stree	T ADDRESS			Change	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			5 2 5.3 5.4	NAME STREE CITY-	T ADDRESS ST-2IP				Addition
TITLE NAME STREEL ADDRESS CITY-ST-ZIP TITLE		☐ DEFELE	5 2 5.3 5.4 6 1	NAME STREE CITY- TITLE	T ADDRESS ST-2IP			Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME			5 2 5 .3 5 .4 6 .1 6 .2	NAME STREE CITY- I TITLE NAME	T ADDRESS ST-2IP				Addition
TITLE NAME STREEL ADDRESS CITY-ST-ZIP TITLE			5 2 5 .3 5 .4 6 .1 6 .2 6 .3	NAME STREE CITY- TITLE NAME STREE	T ADDRESS ST-2IP				Addition

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:

Soffrey A. Busse bignary and typed or printed name of signing oppicer or director

4-19-96 407-642-0893

;R2E034 (12/95)