

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

DOCUMENT # **K62754** (2)

SEAL - MAY 1 1995 3:57

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

NEE'S KUNG FU STUDIO, INC.

Principal Office in Florida
C/O KHAMMANY TOUISITHIPHONEXAY
12516 PINES BLVD.
PEMBROKE PINES FL 33027
US

Mailing Address
C/O KHAMMANY TOUISITHIPHONEXAY
12516 PINES BLVD.
PEMBROKE PINES FL 33027
US

3. Date of Incorporation or Reincorporation: **01/30/1989**

3a. Date of Last Report: **04/07/1994**

4. FIC Number: **65-0174405**

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 to contribute to the Florida Statutes: ☐ Yes ☒ No

2. Principal Office in Florida: **21**

2a. Mailing Address: **26**

2b. State of Incorporation: **22**

2c. City & State: **27**

2d. City & State: **28**

2e. City & State: **29**

2f. City & State: **30**

9. Name and Address of Current Registered Agent

TOUISITHIPHONEXAY, KHAMMANY
18349 NE 4 COURT
NORTH MIAMI BEACH FL 33179

10. Name and Address of New Registered Agent

81. Name: _____

82. Street Address (P.O. Box Number or Post Office Box): _____

83. _____

84. City: _____

85. Zip Code: **FL**

11. I, the undersigned, being a resident of the State of Florida, do hereby certify that the foregoing is a true and correct copy of the information required by the Florida Statutes, and that the same is true and correct as the same appears from the public records of the State of Florida.

SIGNATURE _____

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS

1. NAME	PSD TOUISITHIPHONEXAY, KHAMM	1. NAME	☐ Change ☐ Add
2. STREET ADDRESS	3500 ISLAND BLVD #D401	2. STREET ADDRESS	
3. CITY & STATE	N MIAMI BEACH FL	3. CITY & STATE	☐ Change ☐ Add
4. NAME	VTD	4. NAME	
5. STREET ADDRESS	LOSEK, AMY (TOUISITHI	5. STREET ADDRESS	
6. CITY & STATE	3500 ISLAND BLVD #D401	6. CITY & STATE	
7. NAME	N MIAMI BEACH FL	7. NAME	
8. STREET ADDRESS		8. STREET ADDRESS	
9. CITY & STATE		9. CITY & STATE	
10. NAME		10. NAME	
11. STREET ADDRESS		11. STREET ADDRESS	
12. CITY & STATE		12. CITY & STATE	
13. NAME		13. NAME	
14. STREET ADDRESS		14. STREET ADDRESS	
15. CITY & STATE		15. CITY & STATE	
16. NAME		16. NAME	
17. STREET ADDRESS		17. STREET ADDRESS	
18. CITY & STATE		18. CITY & STATE	

14. I, the undersigned, do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 608.01, Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and correct, and that the corporation shall have the same kept on file as a public record. I am the officer or director of the corporation or the person authorized to prepare this report as required by the Florida Statutes, and that my name appears on the books of the corporation as an officer or director with an address.

SIGNATURE: *[Signature]* 5/1/95

SECRETARY AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra H. Northcutt
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K63099

(1)

1. Corporation Name

LAPCIUC GROUP, INC.

Principal Place of Business

**1401 NW 88 AVENUE
MIAMI FL 33172**

Mailing Address

**1401 NW 88 AVENUE
MIAMI FL 33172**

DO NOT WRITE IN THIS SPACE

3. Date incorporated or qualified

02/03/1989

3a. Date of Last Report

03/14/1994

4. FEI Number

65-0101214

Applied For

☐ Not Applicable

5. Certificate of Status Agreed ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contributions ☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under Fla. Stat. § 218.01?
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**LAPCIUC, MARCOS
1401 NW 88 AVENUE
MIAMI FL 33172**

10. Name and Address of New Registered Agent

81. Name

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

83. City

84. State

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0607 and 607.1506, 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 607.0607, Florida Statutes.

SIGNATURE

(Signature of Officer or Director)

(Signature of Registered Agent)

(Date)

12. OFFICERS AND DIRECTORS

1. NAME

**D
LAPCIUC, ISRAEL
1401 N.W. 88TH AVENUE
MIAMI FL**

2. NAME

**D
LAPCIUC, MARCOS
1401 N.W. 88TH AVENUE
MIAMI FL**

3. NAME

4. NAME

5. NAME

6. NAME

7. NAME

8. NAME

9. NAME

10. NAME

11. NAME

12. NAME

13. NAME

14. NAME

15. NAME

16. NAME

17. NAME

18. NAME

19. NAME

20. NAME

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS

1. NAME

2. NAME

3. NAME

4. NAME

5. NAME

6. NAME

7. NAME

8. NAME

9. NAME

10. NAME

11. NAME

12. NAME

13. NAME

14. NAME

15. NAME

16. NAME

17. NAME

18. NAME

19. NAME

20. NAME

21. NAME

22. NAME

23. NAME

24. NAME

25. NAME

26. NAME

27. NAME

28. NAME

29. NAME

30. NAME

14. I do hereby certify that the information reported with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(4)(b), Florida Statutes. I further certify that the information indicated on the 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 resident or resident empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 of this filing or on an after-bound with an address.

SIGNATURE:

MARCUS LAPCIUC
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/1/95

305-542-4760

APPROVED
AND
FILED



4. THE GOVERNMENT OF STATE
 OF CALIFORNIA
 COUNTY OF _____
 DO hereby certify that _____
 is the _____ of _____

(0)

GLENNMAR PROPERTIES, INC.

STATE OF FLORIDA

~~4323 RACQUET CLUB DR.~~
LAUDERHILL FL 33319
US

~~4522 RAGNET CLUB DR~~
LAUDERHILL FL 33319
US

3. Date of report filed by applicant	3a. Date of last request
02/08/1989	01/27/1994

21	496d NW 72nd Terrace	26	496d NW 72nd Terrace
22		27	
23		28	
24	25	29	30

4. ☐ 11/15/1999 11/15/1999	☐ 12/17/1999 12/17/1999
52-1622929	☐ Applied For ☐ Not Applicable
5. ☐ Certificate of State is Devoid	☐ \$8.75 Additional Fee Required
6. ☐ Election Campaign Financing Trust Fund Contribution	☐ \$5.00 May Be Added to Fees
7. ☒ This corporation has not elected the alternative fee schedule for Political Financial Disclosure.	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ROSENBERG, JEFFREY S.
1601 N. PALM AVE., SUITE 109
PEMBROKE PINES FL 33026

81	Name:	Eileen S. Hill
82	Street Address: (If a Box Number is not acceptable)	1060 Sunset Strip, Suite B
83		
84	City:	Sunrise
85	FL	Zip Code: 33313

11. The report of the investigation of the activities of the Young Florida Militaries, the only organized communist groups in the state, is being reviewed by the Department of the Attorney General. The state of Florida has been advised that the Department is required to provide a copy of the report to the Department of the Attorney General.

4/28/95

12.	OFFICIAL AND/OR CHIEF	13.	ADDITIONS/CHANGES TO OFFICERS AND CHIEFS
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[illegible]

SIGNATURE:

INDIAN NAME AND TYPE OF ORIGIN: NAME OF INDIAN OFFICE IN WHICH EMPLOYED

4/28/95 305-733-2882