SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE \$117/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

CORPORATION ANNUAL REPORT



TUDRIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # K78652

(0)

LAMAN ACQUISITIONS, INC.

Principal Place of Business

Mailing Address

OL GADY LAMAN

FILED Aug 05 1997 8:00am Secretary of State



3020 SEVILLE STREET		3020 SEVILLE STREET		DO NOT WINTE IN THE COACE	
FORT LAUDERDALE FL 33304		FORT LAUDERDALE FL 33304		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report	
					1
		T & A & 10		04/07/1989 4. FEI Number	02/19/1996
	lace of Business	2a. Mailing Address	eriuz et		Applied For
21 800			etime 81	65-0128385	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	" LAUD ZROKE, FL	City & State	mans Fl	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
23 FON	Country	28 7007 LPU	Country	8. This corporation owes or has pa	
<u>ت چي ت</u>	25	29 33304	30	Personal Property Tax due June	
24 7076	9. Name and Address of Curren		30	10. Name and Address of New Re	
1.40		. riogiotoroa rigent	81 Name		
	MAN, GARY P		- $ -$	was canow	
	O SEVILLE STREET		82 Street Ad	dress (P.O. Box Number is Not Acceptat	ote)
FOR	RT LAUDERDALE FL 33304	•	83	O XIVIUE DI	
			103		
	•		84 City	14	85 Zip Code
			Tran	T VAUNTROPRE	FL 33250
11. Pursuant	to the provisions of Sections 607.050.	2 and 607.1508, Florida Sta	tutes, the above-named co	rporation submits this statement for the pation's board of directors. I hereby accept	ourpose of changing its registered
agent. I a	registered agent, or both fill the state am familia, with, and accept the obliga	ations of, Section 607.0505,	Florida Statyles.	alon's board of directors. Thereby accou	of the appointment as regionered
SIGNATURE	Linila Lormon		7//5/91		
SIGNATURE	Signature, typed or printed larine of registered age	ol and title if applicable (N	IO1E: Registe od Agent signature req		DATE
12.	OFFICERS ANI		13.	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12
TITLE	LIND LANAN	☐ DELETE	1.1 TITLE	liano C IAM	CIERO CHARGINIO
NAME	3030 861173 2.	T	1.2 NAME	LINUN Q. FAR	- Paricus
STREET ADDRESS			1,3 STREET ADDRESS	- 2 C	Car ET
CITY-ST-ZIP	From Low Dond Bli	s fl 333mm	1.4 CITY - ST - ZIP	o as Herisac w	
TITLE		DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME	ambadelle File	333e <i>U</i> .
STREET ADDRESS	1		2.3 STREET ADDRESS		7000
CITY-ST-ZIP			2. 4 CITY - ST - ZIP	-	
TITLE		DELETE	3.1 TITLE		Change Addition
NAME	1		3.2 NAME		-
			3.3 STREET ADDRESS		
STREET ADDRESS					
CITY-ST-ZIP TITLE	ļ	DELETE	3.4. CITY - ST - ZIP 4.1 TITLE		Change Addition
	l	La pecet	4.2 NAME		
NAME			•		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		Dr. For	4.4 CITY-ST-ZIP		Change Addition
TITLE	1	DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS	1		5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP	-	
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	1		6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZiP			6.4 CITY - ST - ZIP		
U111-01-ZIP				ad in Contine 110 07(3)(i) Florida Statuta	a I further partiful that the

I do 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 on an attachment with an address.