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PROFIT
CORPORATION
ANNUAL REPORT
1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

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Jan 28 1997 8:00am

Secretary of State

0206505

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K79622

(2)

URE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LIGHTHOUSE INVESTMENTS, INC.

Principal Place of Business Mailing Address							ANTA DIBII BIBII DIBA	#(D) #DD	
260 CRANDON KEY BISCAYNE	BLVD. UNIT 21		260 CRANDON BLVD. UNIT 21 KEY BISCAYNE FL 33149-1537						
						3. Date incorporated or Qualified 04/12/1989	3a. Date of Last Re 03/12/1996	eport	
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number	Ap	plied For	
1		26				65-0173925		t Applicable	
Suite, Apt a		Suite, Apt. #, etc.	27			5. Certificate of Status Desired Fee Required			
City & State	2	City & State	├ ┐ '			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution			
Zip Country		Zip	Zip Coi			8. This corporation has liability for intangible tax under s. 199.032,			
4	25			30		Florida Statutes Yes No			
0110	9. Name and Address of Curre	nt Registered Agent			Name	10. Name and Address of New Registered Agent			
	ACE, ALESSANDRO GULF ROAD								
	BISCAYNE FL 33149			82	Street Addre	ress (P.O. Box Number is Not Acceptable	e)		
VE I	DISONING FL WITE			83					
				84	City		85 Zip (Code	
			1			poration submits this statement for the pu			
SIGNATURE	m familiar with, and accept the oblig	gent and tille it applicable. (NC	OTE Registere	ed Ager		red when reinstating)	DATE CONTROL OF THE C	- DI 10	
12.	OFFICERS AN	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	Change	Addition	
THEF NAME	SURACE, GINO			1 1 TITLE 1.2 NAME			LI Onange	L AMORION	
STREET ADDRESS	301 GULF RD			1.3 STREET ADDRESS					
CITY-ST-ZIP	KEY BISCAYNE FL		1	OTY-SI	1			!	
TITLE	STD	2.1 7		1 4.0		Change	☐ Addition		
NAME:	SURACE, ALESSANDRO		2.2 N	2.2 NAME					
STREET ADDRESS	301 GULF ROAD		2.3 \$	TREET	ADDRESS				
CITY-ST-ZIP	KEY BISCAYNE FL			CITY-S	ST - ZIP			-	
ויוד 📗		DELETE	3.1 1			• *	Change	Addition	
NAME .			3.2 N			•			
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP		DELETE	3.4. C	CITY-S	iT-ZIP		Change	Addition	
TITLE		had Ditti		NÁME		•	[] Origings	Montoon L	
STREFT ADDRESS					ADDRESS				
CITY - ST - ZIP				SINEET SITY-SI					
THILE		DELETE	5.1 T		1-2"		Change	☐ Addition	
NAME			5.2 N	IAME			•		
STREET ADDRESS			5.3 S	TREET	ADDRESS				
C(TY - ST - ZIP			5.4 C	ITY-\$1	T-ZIP				
TITLE		DELETE		6.1 TITLE			Change	Addition	
NAME			6.2 N	IAME					
STREET ADDRESS			6.3 S	TREET	ADDRESS				
CITY - S1 - ZIP				HTY-S					
informatio Lam an of	n indicated on this annual report or	supplemental annual report is or the receiver or trustee empo	true and owered to o	accu	irate and that	d in Section 119.07(3)(i), Florida Statutes t my signature shall have the same legal rt as required by Chapter 607, Florida St	l effect as if made uni	der oath; that	