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PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

161

LAURA JOY, INC.				
ncipal Place of Business	Mailing Address			M IIM ASALI AIAII AIAIS AIAIS BIRIS ASAN ANAN SAAS
% Robert Gittleman 10755 S.W. 190th Street. Suite 46 Miami Ft. 33157	10755 S.W. 190TH ST	% Robert Gittleman 10755 S.W. 190Th Street. Suite 46 Miami Fl. 33157		3a. Date of Last Report
MAMI PE 0010	MIN MAIL TE COLO		 Date Incorporated or Qualified 10/13/1989 	04/13/1995
Inncipal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
Thompson Files of Control of the Con	26		NOT APPLICABLE	Not Applicable
suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
	27			- Fee Required
Dity & State	Orty & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Z _{ID} Country	28 Zip	Country	8. This corporation has liability for	
P _{ID} Country	29	30		. □No
	1 Current Registered Agent		10. Name and Address of New F	Registered Agent
		81 Name		
GITTLEMAN, ROBERT		82 Street Add	ress (P.O. Box Number is Not Acceptab	ole)
10755 S.W. 190TH STREET		<u> </u>		
SUITE 46		83		
MIAMI FL 33157		84 City		FL 85 Zip Code
Pursuant to the provisions of Sections of or registered agent, or both, in the Stat familiar with, and accept the obligations				
Signature, typed or primed rame, of reg	pyed a jert and this it applicants the	৩% স্থান বিশ্ব স্থান কৰে প্ৰতিশ্ব স্থান কৰে কৰে প্ৰতিশ্ব স্থান কৰে কৰে প্ৰতিশ্ব স্থান কৰে কৰে প্ৰতিশ্ব স্থান কৰে প্ৰতিশ্ব স্থা	ed when reinstating)	DATE FICE RS AND DIRECTORS IN 12
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SNATURE Spriature, typed or princed carne, of reg. OF FIG.	Overal a pint and title it applicants (INDEERS AND DIRECTORS)	(OTE Registered Agent signature require	ed when reinstating)	DATE FICERS AND DIRECTORS IN 12
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SIGNATURE:

Robert Gittleman IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/96

(305)253-3456

Dajtane Plione *