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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # 1. Corporation Name

(3)

L.L.G. CORPORATION



822 E. CYPRESS LANE POMPANO BEACH FL 33069			822 E. CYPRESS LANE POMPANO BEACH FL 33069				
					3. Date incorporated or Qualified 11/15/1989	3a. Date of Last 03/08/	
Principal Pao	e of Business	2a. Mailing Address			4. FEI Number		Applied For
· · · · · · · · · · · · · · · · · · ·		26	26		65-0164570		Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired Serviced Fee Required		
City & State		City & State			Election Campaign Financing Trust Fund Contribution	⊔ Ad	.00 May Be ded to Fees
 -Zip 	Country 25	Z _I p 29	Coun	try	8. This corporation has liability for Florida Statutes Yes	intangible tax under : No	s 199.032,
	9. Name and Address of Curre	ent Registered Agent			10. Name and Address of New F	Registered Agent	
			6	Name			
GILBERT, ALFRED A 822 E. CYPRESS LANE POMPANO BEACH FL 33069			1	32 Street Add	Address (P.O. Box Number is Not Acceptable)		
			T T	33			
				34 City	oration submits this statement for the pu	FL	Zip Code
	, and accept the obligations of, Se						
54	synasmolitypick or printed name of registered ag			gent signature require	red when reinstahing!	DATE	TORS IN 12
		ND DIRECTORS	13.		red when reinstahrg! ADDITIONS/CHANGES TO OFF	FICERS AND DIREC	
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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.

GNATURE:

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR