AMOUNT DUE	NOTICE: CORPORATION WILL BE I ON OR BEFORE 8/7/96: \$225 (IF DISSO	DISSOLVED ON OR AFTER AL LVED, MINIMUM AMOUNT DUE 1	IGUST 7, 1996. O REINSTATE: \$375.)	-	
	PROFIT PORATION	FLORIDA DEPARTM			
	IAL REPORT	Sandra B I Secretary			
	1996	DIVISION OF CO			
DOCUN 1. Corporation	MENT # L32458	(6)			
LAKE A	CRES, INC.				
- 112 / 1					
Principal Place	e of Business	Mailing Address			II OLON Bion Fion Offic Olon Biof
* SERVIA B. RINDFLEISH					
		 P.O BOX 17 2 - - PALM BEACH FL 3348 0		3. Date Incorporated or Qualified	3a. Date of Last Report
				11/29/1989	12/28/1995
2. Principal Pi	ace of Business 7 Local the FL	2a. Mailing Address 26 Box 307		4. FEI Number 65-0199486	Applied For Not Applicable
Suite, Apt		Suite, Apt. #, etc.		Certificate of Status Desired	\$8.75 Additional
22 City & State		City & State		6. Election Campaign Financing	Fee Required
23		28 Loxabatch	ice, FL	Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 334	70 25 USA	²⁹ 33470 3	Country	This corporation has habit ty for Florida Statutes	intangible tax under s 199 032, Yes 💢 No
		Registered Agent	81 Name	10. Name and Address of New Re	gistered Agent
HIND-LEISH, SERVIA B.					
MIAMI FL				dress (P.O. Box Number is Not Acceptal	oie)
			83		
			84 City		FL 85 Zip Code
office or re	egistered agent, or both, in the State of	of Florida. Such change was auti	iorized by the corpora	poration submits this statement for the patients board of directors. Thereby accept	urpose of changing its registered the appointment as registered
agent. Lar SIGNATURE	m familiar with, and accept the obligat	tions of, Section 607.0505, Floric	da Statutes		•
	Signature, typed or printed name of registered agen OFFICERS AND		Registered Agent signature req	ured when roinstating) ADDITIONS/CHANGES TO OFFICE	DAIE
12.	DV OFFICERS AND	DELETE	1 1 TITLE	ADDITIONS/CHANGES TO OFFIC	Change Addition
NAME	RINDFLEISH, JOHN C.		12 NAME		
STREET ADDRESS	9200 S.W. 66 STREET		1.3 STREET ADDRESS	Miami, FL Miami, FL	
CITY-ST-ZIP TITLE	DPT	DELETE	1 4 CITY - ST - ZIP 2 1 TITLE	14141111) 12	Change Addition
NAME	RINDFLEISH, SERVIA B.		2 2 NAME		
STREET ADDRESS	9200 S.W. 66 STREET		2 3 STREET ADDRESS	A 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
CITY-ST-ZIP	—PALM BEACH FL	T Decerte	2 4 CITY - ST - ZIP	MIAMI, FL	Change Addition
TITLE NAME		☐ DELETE	3 1 TUTLE 3 2 NAME		Change Addition
STREET ADDRESS			3 3 STREET ADDRESS		
CITY-ST-ZIP			34 CITY-ST-ZIP		
TITLE		DELETE	41 TITLE		Change Addition
NAME			4 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS 4.4 CITY - ST - ZIP		
CITY - ST - ZIP TITLE		DELETE	51 TITLE	· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME			5 2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		·
CITY - ST - ZIP		Lociere	5 4 CITY - ST - ZIP		Chana Addres
TITLE NAME		DELETE	6 1 YITLE 6 2 NAME		Change Addition
STREET ADDRESS			6 3 STREET ADDRESS		
CITY-ST-ZIP			6 4 CITY - ST - ZIP		
further ce	rtify that the information indicated on t	this annual report or supplement	al annual report is true	alify for the exemption stated in Section and accurate and that my signature shi	all have the same legal effect as if
	der oath, that I am an officer or directo ame appears in Block 12 or Block 13 if			ed to execute this report as required by	Chapter 617, Florida Statutes, and

SIGNATURE:

SIGNORE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

7/28/96 5617435865