## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L33555

(8)

Mailing Address

L & M INVESTMENTS, INC.

FILED
Apr 29 1997 8:00am
Secretary of State



2881 SW 88TH DAVIE FL 3332 US		2881 SW 86TH W Dayie FL 33328-1 US						
00		00			3. Date Incorporated or Qualified 12/04/1989	3a. Date of 05/01/1		
2. Principal Pi	ace of Business	2a. Mailing Addr	28. Mailing Address		4. FEI Number	Applied For		
21		26			65-0167900	Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #,	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State			City & State		6. Election Campaign Financing	ing \$5.00 May Be		
23		28	["""]		Trust Fund Contribution	Added to Fees		
Zip	Country	Zip	Cour	try	8. This corporation has liability for intangible tax under s. 199.032,			
24	25	29	30		Florida Statutes Yes No			
· · · · · · · · · · · · · · · · · · ·	9. Name and Address o	f Current Registered Agent		10. Name and Address of New Registered Agent				
ЩО	YD, PETER J.			31 Name				
	SW 86TH WAY		}	32 Street A	Address (P.O. Box Number is Not Acceptab	la\		
	IE FL 33328				Address (F.O. Box Normber is Not Acceptab	лс <i>)</i>		
			ļ	33				
· 				B4 City		FL 85	Zip Code	
office or re	egistered agent, or both, in t	607,0502 and 607,1508. Floric the State of Florida. Such chan the obligations of, Section 607.	ge was authorized	by the corp	corporation submits this statement for the poration's board of directors. I hereby acceptions	ourpose of chan of the appointm	ging its registered ent as registered	
	Signature, typod or printed name of reg	pistered agent and title it applicable	(NOTE: Registered	Agent signature i	required when reinstating)	DATE		
12.	OFFICERS AND DIRECTORS				ADDITIONS/CHANGES TO OFFIC	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	DE	LETE 1.1707	£			hange Addition	
NAME	LLOYD, PETER J.		1.2 NAI	AE				
STREET ADDRESS	2881 SW 86TH WAY	* · · · * * · · · · · · · · · · · · · ·		EET ADDRESS				
CITY-ST-ZIP	DAVIE FL		1.4 CIT	(-ST-Z)P				
TITLE	<b>V</b>	☐ DE	LETE 2.1 TO	F			hange Addition	
NAME	MORANO, CARMEN		2.2 NAI	AE .				
STREET ADDRESS	2881 SW 86TH WAY		2.3 STF	EE1 ADDRESS				
CITY-ST-ZIP	DAVIE FL		2. 4 CI	Y-ST-ZIP				
TITLE	\$	☐ DE	LETE 3.1 TIT	f			hange 🔲 Addition	
NAME	Morano, Barbara		3.2 NAI	AL {	•	• •		
STREET ADDRESS	2881 SW 86TH WAY		33516	EET ADDRESS				
CITY-ST-ZIP	DAVIE FL			Y-ST-ZIP				
TITLE	Ţ	<b>▼</b> DE	LETE 4.1 TIT	f			hange Addition	
NAME	LLOYD, ARLENE		4. 2 NA	ME				
STREET ADDRESS	2881 SW 86TH WAY		4.3 STF	EE1 ADDRESS				
CITY-ST-ZIP	DAME FL			Y-ST-ZIP				
TITLE	····	☐ DE	LETE 5.1 TOT	E Ţ			hange 🔲 Addition	
NAME			5.2 NA	AE [				
STREET ADDRESS			5.3 STF	FE1 ADDRESS				
CITY-ST-ZIP				7-S1-ZIP				
TITLE		☐ DE	LETE 611IT	.ŧ			hange Addition	
NAME			6.2 NA	AE				
STREET ADDRESS			6.3 S1F	LET ADDRESS				
CITY-ST-ZIP			6.4 C/I	Y-ST-7IP				
14. I do heret informatio i am an of	by certify that the information in indicated on this annual re- fficer or director of the corpo	supplied with this filing does i port or supplemental annual re tration of the receiver or truste	not qualify for the e port is true and a e empower d to c	exemption st ocurate and secute this re	ated in Section 119.07(3)(i), Florida Statute that my signature shall have the same lega eport as required by Chapter 607, Florida S	s. I further certi al effect as if ma statutes, and the	fy that the ade under oath; that at my name	