FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sanora B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

(4)

DOCUMENT #

1. Corporation Name

Principal Place of ONE EAST BRO SUITE 1101 FT. LAUDERDAL US		Mailing Address	LAGUNA INVESTMENTS, INC. Mailing Address				
		SUITE 1101	ONE EAST BROWARD BLVD SUITE 1101				
FT. LAUDERDALE FL 33301 US		ft. Lauderdale fl US	FT. LAUDERDALE FL 33301 US		3. Date Incorporated or Qualified 3a. Date of Last Report 05/01/1995		
2. Principal Place of Business		2a. Maling Address	2a. Mailing Address		4. FE: Number	.1	Applied For
1		26			65-0180147		Not Applicab
Suite, Apt. #,	etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required
City & State		City & State			6. Election Campaign Financing		\$5.00 May Be
3 Courts		28			Trust Fund Contribution		Added to Fees
Zip Country 25		Zigi Country [29]		ý	 This corporation has liability for intangible tax under s 199.032, Flonda Statutes ☐ Yes ☐ No 		
1	g, Name and Address of Curren				10. Name and Address of New F	Registered A	gent
			81	Name			
HORVITZ, DAVID W. ONE EAST BROWARD BLVD.			82 Street Ad		ress (P.O. Box Number is Not Accepta:	ole)	
ONE EAS			83	 			
	ERDALE FL 33301			ļ			85 Zip Code
			84	,	ration submits this statement for the pu	FL	
SIGNATURE si	and accept the obligations of, Sect	and the diagram able (A	v STE - Registered Ag	का हेकु। वावास हो एकेंट	acid criticistics. ADDITIONS/CHANGES TO OFF	DATE SICERS AND	DIRECTORS IN 12
III.	OFFICERS AN	DELETE	13.		ADDITIONS/OFFARGES TO OFF		Cnange Additio
NAME	HORVITZ, DAVID W.		1.2 NAME				
STREET ADDRESS	2419 LAGUNA DR.		13 STREE	T ADDRESS			
C-TY - ST - ZIP	FT. LAUDERDALE FL		1.4 CIFY				Change Additio
TIFLE		☐ DELETE	2 1 THUE 2 2 NAME	1		L] Change [] Addition
MAME STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP			2.4 CiTY	-ST-ZP			
TILLE	E		3 1 TITLE] Change [] Additio
NAME			3.2 NAMI				
STREET ADDRESS			33 STPE 34 CITY	ET ADDRESS			
CITY - ST - 7:P TITUE		DELETE	4 1 1111				Change Additi:
NAME		_	4.2 NAM	£ .			
SIRRET ADDRESS			4.3 S166	EL ADDRESS			
CITY-ST-ZIP			4.4 CITY				Change Addition
TIFLE		DELETE	5 1 THU 5 2 NAM			L	
NAME STREET ADDRESS				EL ADDRESS			
CITY-ST-ZIP			5.4 CITY	1			
TITLE		DELETE	6. 1 THL	f	Change A		Change Addition
NAME			6.2 NAM				
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP 14. Ldo hereby	certify that the information supplied	with this filing is voluntarily for	irnished and de	SI-ZIP oes not qualify	for the exemption stated in Section 11	9.07(3)(k). Flo	rida Stalutes. I further
certify that oath; that I appears in	the elecantrop indicated on this are	iual report or supplemental a oration of the receiver or trus	innual report is stee empowere	in le and accul	rate and that my signature shall have th his report as required by Chapter 607, I	e same legal	ellect as it made und