

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # L64810 (9)

1. Corporation Name

LAUJER, INC.



Principal Place of Business

Mailing Address

VAUTHRIN, PATRICK

~~555 NORTH OCEAN BLVD~~  
POMPAÑO BEACH FL 33060  
US

612 NE 3RD AV.

VAUTHRIN, PATRICK X

~~555 NORTH OCEAN BLVD~~  
POMPAÑO BEACH FL 33060  
US

Patrick

612 NE 3RD AV.

3. Date Incorporated or Qualified

04/11/1990

3a. Date of Last Report

04/06/1995

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

612 N. E. 3rd Avenue

27

Pompano Beach

28

Pompano Beach, Florida

29

33062

30

USA

4. FEI Number

65-0182333

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be

Added to Fees

7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

☒

Yes

☐

No

9. Name and Address of Current Registered Agent

VAUTHRIN, CHRISANTHI

~~555 NORTH OCEAN BLVD~~ 612 NE 3RD AV.

POMPAÑO BEACH, FL 33060

10. Name and Address of New Registered Agent

81

Name

CHRIS VAUTHRIN

82

Street Address (P.O. Box Number is Not Acceptable)

612 N. E. 3rd Avenue

83

84

City

Pompano Beach, Florida

FL

85

Zip Code

33060

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent's signature required when reinstating)

Date

12.

OFFICERS AND DIRECTORS

TITLE

DS

☐ DELETE

NAME

VAUTHRIN, CHRISANTHI X CHRIS

STREET ADDRESS

~~555 N. OCEAN BLVD~~ 612 N. E. 3rd Avenue

CITY - ST - ZIP

POMPAÑO BEACH FL

TITLE

DPT

☐ DELETE

NAME

VAUTHRIN, PATRICK J.

STREET ADDRESS

~~555 N. OCEAN BLVD~~ 612 N.E. 3rd Avenue

CITY - ST - ZIP

POMPAÑO BEACH FL

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

☐ Change

☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

21 TITLE

☐ Change

☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

31 TITLE

☐ Change

☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

41 TITLE

☐ Change

☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

51 TITLE

☐ Change

☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

61 TITLE

☐ Change

☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
PATRICK J. VAUTHRIN

6/27/96

Date

Signature Printed Name

CR2E034 (3/96)