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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # L96217

(9)

LTC INVESTMENTS INC.

LIG INVESTMENTS, INC.							
Principal Place of Business	Mailing Address						
2531 N.W. 72ND AVENUE. SUITE B MIAMI FL 33122	9261 SW 11TH STREET MIAMI FL 33174 US						
2. Principal Place of Business	2a. Mailing Address						

<u> </u>	
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								3. Date Incorporated or Qualified	3a. Date	of La	st Report		
2 Principal Disease (D								08/10/1990					
2. Principal Place of Business 2a. Mailing Address							4. FEI Number	·	9,00	Applied For			
26							65-0225938		-	Not Applicable			
Suite, Apt.	#, etc.		 -	Suite, Apt. #, etc.	uite, Apt. #, etc.				ψQ.	.75 Additional			
22			27	27			5. Certificate of Status Desired			ee Required			
City & State			ļ	City & State									
23			28	8				Trust Fund Contribution 5.00 May Be Added to Fees					
Zip	ļ	Country	ļ	Zip	Cou	intry			tanaible to	- All	obed to Fees		
24 25 29 30				30	Country 8. This corporation has liability for intangible tax under s Florida Statutes ☐ Yes ☐ No					ar 8 199.032,			
	9. Name a	nd Address of Currer	nt Regi	stered Agent				10. Name and Address of New Registered Agent					
İ						81	Name		B	gont	· · · · · · · · · · · · · · · · · · ·		
IGLESIA	AS, JOSE A.					82	Ohrant Andri	ID 0. 0					
9261 S.	.W. 11TH ST	•				62	Street Addr	ress (P.O. Box Number is Not Acceptable	3)				
MIAMI F	FL 33174				l	83	-						
						l							
l						84	City		<i>—</i>	85	Zip Code		
11. Pursuant t	to the provision	s of Sections 607.0502	and 60	07.1508, Florida Statute	s the abo	l	amed corpor	ation submits this statement for the purp	FL	$\perp \downarrow$			
or registere familiar wit	ed agent, or bo th, and accept	oth, in the State of Floric the obligations of Secti	da. Suc	h change was authorize .0505, Florida Statutes.	d by the c	orpo	pration's boar	ation submits this statement for the purp of of directors. Thereby accept the appoi	ose of char ntment as i	nging i registe	its registered office		
SICNIATURE								, , , , , ,		ogioto	Too bgorit. Fairi		
OIGITATIONE _	Signature, typicd or p	printed name of registered agent	end title if	arrokable AvriT	f Booletwood	Agent					l		
12.		OFFICERS AND	D DIRE	CTORS	13.	- Мун	signature required		DATE				
TITLE	PDS			DELETE	1, 1 7 17			ADDITIONS/CHANGES TO OFFIC					
NAME	IGLESIAS	, JOSE A.			1.2 NA		İ		L) Chang	ge 🔲 Addition		
STREET ADDRESS		/. 11TH ST.					ADDRESS				ł		
CITY-ST-ZIP	MIAMI FL												
TITLE	VD			□ DÉLETE	1.4 CiT 2 1 Til		- ZIP						
NAME		, ROLANDO		Doctor						Chang	ge 🔲 Addition		
STREET ADDRESS	9285 S W	. 10TH TERRACE			2.2 NAI	-							
CITY-ST-ZIP	MIAMI FL	. WITH TENNAUE					ADDRESS						
TITLE	IIII/AVII I L			DELETE	2.4 CIT		- ZIP				1		
NAME				C) pricit	3. 1 T ₁ T					Chang	ge 🔲 Addition		
STREET ADDRESS					3.2 NAM						İ		
CITY-ST-ZIP							ADDRESS						
TITLE		*****		DELETE	3.4 CIT1		ZIP						
NAME				T Dereit	4. 1 Ti)		1			Change	e Addition		
STREET ADDRESS					4 2 NAM						ł		
CITY-ST-ZIP					4.3 STR	EET AI	DDRESS						
TITLE					4.4 City	- ST-	ZIP						
NAME				☐ DELETE	5. 1 7(1)	.F	-			Change	e Addition		
1					5.2 NAM	E							
STREET ADDRESS					5.3 STR	ET AC	DDRESS						
CITY-ST-ZIP					5.4 C(TY	- ST-	ZIP				1		
TITLE				☐ DELETE	6. 1 TITL					Change	e Addition		
NAME					62 NAM	E				onunge	- LJ Addition		
STREET ADDRESS					6.3 STRE	FTAC	DRESS						

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 cath; 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

SIGNATURE:

JIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/96 (30r) NO2 V-103