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

PROFIT CORPORATION ANNUAL REPORT:

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M39490

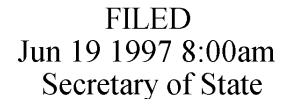
(1)

L.R. DAVIS, INC.

Principal Place of Business

Mailing Address

ROOM NW 90 ST





MARGATE FL 33063		MARGATE FL 33063-2312							
						3. Date Incorporated or Qualified 10/03/1986		e of Last F 8/1996	Report
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number		A	pplied For	
21		26				59-2717250			ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired See Required Fee Required			
City & State		City & State				6. Election Campaign Financing		\$5.00	May Be
23		28				Trust Fund Contribution		•	to Fees
Zip	Country	Zip	Cou	intry		8. This corporation has fiability for i			s. 19 9.032,
24	25	29	30					No	
	9. Name and Address of Curre	nt Registered Agent		1		10. Name and Address of New Re	gistered A	gent	
DAVI	S, LARRY R.			81	Name				
6201	NW 20 ST.		82 Street Add			iress (P.O. Box Number is Not Acceptab	le)		
MAR	GATE FL 33063								
				83					
				84	City		— ·	85 Zip	Code
				<u> </u>			<u>FL</u>		
office or re	o the provisions of Sections 607.05 gistered agent, or both, in the Stat n familiar with, and accept the obliq	e of Florida. Such change was	s authorize	d by	z the caraora	poration submits this statement for the partion's board of directors. I hereby acceptions	urpose or of the appo	antment as	registered
SIGNATURE	Signature, typed or printed name of registered as	And and the deposits white	OIL Gorislan	0 600	ud e ocaluse too	uited when reinstaling)	DATE		
12.		ND DIRECTORS	13.	- Age	an a granore re qu	ADDITIONS/CHANGES TO OFFIC		DIRECTO	RS IN 12
TITLE	PTD	DELETE	1.1.1	ITLE				Change	☐ Addition
NAME	DAVIS, LARRY R.	-	1.2 N	AMI				_	
STREET ADDRESS	6201 N.W. 20 ST.				ADDRESS				
CITY-ST-ZIP	MARGATE FL				SI - ZIP	•			
TITLE	VSD D			21 TITLE				Change	Addition
NAME	DAVIS, SUSAN		2.2 NAM						
STREET ADDRESS	6201 N.W. 20 ST.		238	IRFET	ADDRESS				
CITY-ST-ZIP	MARGATE FL				S1-7IP				
TITLE	115 110 110 10	DELETE	3.1 T					Change	☐ Addition
NAME			3.2 N	AME	İ				
STREET ADDRESS			3.3 5	TREET	ADDRESS				
CITY-ST-ZIP			3.4.	этү-з	S1-ZIP				
TITLE		DELETE	4.1 T					Change	Addition
NAME			4. 2	NAME					
STREET ADDRESS			4.3 5	TREET	ADDRESS				
CITY-ST-ZIP			4.4 0	aty-S	ST-ZIP				
TITLE		DELETE	5.1 T					Change	Addition
NAME			5.2 1	AME					
STREET ADDRESS			535	THEFT	ADDRESS				
CITY-ST-ZIP			540	HTY-S	ST-ZIP	·			
TITLE		☐ DELETE	611	ITLE				Change	Addition
NAME			621	IAME					
STREET ADDRESS			635	TAFET	ADDRESS				
CITY-ST-ZIP			6.4 0	HY-5	ST - ZIP				
## Lala barah	y certify that the information suppli	ed with this filing does not qua	alify for the	GVC	motion state	ed in Section 119.07(3)(i), Florida Statute	s. I further	certify tha	t the
Informatio I a m an ol a ppears i	n indicated on this annual report or ficer or director of the corporation of Block 12 or Block 13 if changed,	supplemental annual report is or the receiver or trustee empt or on an attachment with an a	s true and owered to iddress.	exec	urate and the cute this repo	at my signature shall have the same lega ort as required by Chapter 607, Florida S	itatutes; ar	ii illade ur id that my 75'U	name