

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

DOCUMENT # **M44073** (8)

1. Corporation Name
LFR CORP.

95 APR -7 AM 4:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business: **1101 BRICKELL AVENUE
BIV TOWER, SUITE 800
MIAMI FL 33131**

Mailing Address: **001 BRICKELL KEY DR
SUITE 605
MIAMI FL 33131
US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: **12/23/1986** 3a. Date of Last Report: **04/27/1994**

4. FEI Number: **59-2747410** Applied For: Not Applicable:

5. Certificate of Status Desired: **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes: Yes No

2. Principal Place of Business

21. **601 BRICKELL KEY DR.** 26. Suite, Apt. #, etc.

22. **SUITE 605** 27. City & State

23. **MIAMI, FLORIDA** 28. City & State

24. **33131** 25. **USA** 29. Zip 30. Country

9. Name and Address of Current Registered Agent

**RJWITCH, LEE
12030 S.W. 69TH PLACE
MIAMI FL 33158**

10. Name and Address of New Registered Agent

81. Name

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

83.

84. City 85. Zip Code

FL

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 _____ DATE _____
Signature typed or printed name of registered agent if not typed or printed Typed Agent signature required when necessary DATE

12. OFFICERS AND DIRECTORS

TITLE: **D**

NAME: **RJWITCH, LEE**

STREET ADDRESS: **12030 S.W. 69TH PL.**

CITY, ST, ZIP: **MIAMI FL**

TITLE: _____

NAME: _____

STREET ADDRESS: _____

CITY, ST, ZIP: _____

TITLE: _____

NAME: _____

STREET ADDRESS: _____

CITY, ST, ZIP: _____

TITLE: _____

NAME: _____

STREET ADDRESS: _____

CITY, ST, ZIP: _____

TITLE: _____

NAME: _____

STREET ADDRESS: _____

CITY, ST, ZIP: _____

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE: _____ Change Addition

2. NAME: _____

3. STREET ADDRESS: _____

4. CITY, ST, ZIP: _____

5. TITLE: _____ Change Addition

6. NAME: _____

7. STREET ADDRESS: _____

8. CITY, ST, ZIP: _____

9. TITLE: _____ Change Addition

10. NAME: _____

11. STREET ADDRESS: _____

12. CITY, ST, ZIP: _____

13. TITLE: _____ Change Addition

14. NAME: _____

15. STREET ADDRESS: _____

16. 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 110.07(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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **LEE RJWITCH** *Lee R. Rutch*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

APRIL 4, 1995 305-577-3902
TALLAHASSEE, FLORIDA