

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **M44073 (8)**

1. Corporation Name
LFR CORP.



Principal Place of Business: **601 BRICKELL KEY DR STE 605 MIAMI FL 33131 US**
Mailing Address: **601 BRICKELL KEY DR SUITE 605 MIAMI FL 33131 US**

2. Principal Place of Business
21 State, Apt. #, etc.
22 City & State
23 Zip County
24 Zip County

2a. Mailing Address
26 State, Apt. #, etc.
27 City & State
28 Zip County
29 Zip County 30

3. Date Incorporated or Qualified: **12/23/1986**
3a. Date of Last Report: **04/07/1995**
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. 193.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent

**RUWITCH, LEE
12030 S.W. 69TH PLACE
MIAMI FL 33156**

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.05(2) and 601.14(2), 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, both mentioned in, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

1. TITLE: **D** DELETE
NAME: **RUWITCH, LEE**
STREET ADDRESS: **12030 S.W. 69TH PL.**
CITY-STATE-ZIP: **MIAMI FL**

2. TITLE: DELETE
NAME:
STREET ADDRESS:
CITY-STATE-ZIP:

3. TITLE: DELETE
NAME:
STREET ADDRESS:
CITY-STATE-ZIP:

4. TITLE: DELETE
NAME:
STREET ADDRESS:
CITY-STATE-ZIP:

5. TITLE: DELETE
NAME:
STREET ADDRESS:
CITY-STATE-ZIP:

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '92

1. TITLE: Change Addition
2. NAME:
3. STREET ADDRESS:
4. CITY-STATE-ZIP: Change Addition
5. NAME:
6. STREET ADDRESS:
7. CITY-STATE-ZIP: Change Addition
8. NAME:
9. STREET ADDRESS:
10. CITY-STATE-ZIP: Change Addition
11. NAME:
12. STREET ADDRESS:
13. CITY-STATE-ZIP: Change Addition
14. NAME:
15. STREET ADDRESS:
16. CITY-STATE-ZIP: Change Addition
17. NAME:
18. STREET ADDRESS:
19. CITY-STATE-ZIP: Change Addition
20. NAME:
21. STREET ADDRESS:
22. CITY-STATE-ZIP: Change Addition

14. I do hereby certify that the information supplied with this filing is substantially true and correct and does not qualify for the exemption stated in Section 119.07(5)(b) Florida Statutes. I further certify that the information provided on this form of registration agreement 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 person 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 RUWITCH**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
PRESIDENT

4-1-96 **305-577-3902**

CR2E034 (12/95)