

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

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 JAN 17 PM 1:40

DOCUMENT # M44526

(5)

1. Corporation Name:

LAKE FOREST PARK, INC.

Principal Place of Business

6228 SW 131 PLACE #101
MIAMI FL 33183

Mailing Address

6228 SW 131 PLACE #101
MIAMI FL 33183

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified
01/08/1987

3a. Date of Last Report
01/25/1994

4. FEI Number
59-2764320

Applied For
Not Applicable

2. Principal Place of Business

21

2a. Mailing Address

26

State, Apt. #, etc.

State, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CARRODEGUAS, VICENTE
1715 SW 85TH AVE
MIAMI FL 33155**

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 607.0507 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 of Registered Agent or Registered Agent in Charge)

(Signature of Registered Agent or Registered Agent in Charge)

Date

12. OFFICERS AND DIRECTORS	
NAME	DP VAZQUEZ, MICHAEL
STREET ADDRESS	6228 SW 131 PLACE
CITY, ST, ZIP	MIAMI FL
NAME	DT CARRO, JOSE E.
STREET ADDRESS	6228 SW 131 PLACE
CITY, ST, ZIP	MIAMI FL
NAME	DS CARRODEGUAS, MARTA
STREET ADDRESS	1715 S.W. 85TH AVENUE
CITY, ST, ZIP	MIAMI FL
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1 NAME	☐ Change ☐ Addition
1 STREET ADDRESS	
1 CITY, ST, ZIP	
2 NAME	☐ Change ☐ Addition
2 STREET ADDRESS	
2 CITY, ST, ZIP	
3 NAME	☐ Change ☐ Addition
3 STREET ADDRESS	
3 CITY, ST, ZIP	
4 NAME	☐ Change ☐ Addition
4 STREET ADDRESS	
4 CITY, ST, ZIP	
5 NAME	☐ Change ☐ Addition
5 STREET ADDRESS	
5 CITY, ST, ZIP	
6 NAME	☐ Change ☐ Addition
6 STREET ADDRESS	
6 CITY, ST, ZIP	

14. I, the undersigned, certify that the information required by this form has been truthfully furnished and does not qualify for the exemption provided by Sections 119.07, Florida Statutes. I further certify that the information submitted on this form is true and correct and that my signature shall have the same legal effect as if I were the person who signed the information on this form. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, and that my signature on this form constitutes my acceptance of the information furnished and that I am not a director or officer of the corporation.

SIGNATURE:

(Signature and Type or Printed Name of Signing Officer or Director)

Michael Vazquez, President 1/11/95 (305) 386-6035