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
95 MAY -1 AM 4:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **M47004** **(0)**

1. Corporate Name
EL LAGO INVESTMENTS, INC.

Principal Place of Business
% PAUL H. FREEMAN
9100 S. DADELAND BLVD., SUITE 1406
MIAMI FL 33156

Mailing Address
% PAUL H. FREEMAN
9100 S. DADELAND BLVD., SUITE 1406
MIAMI FL 33156

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **02/23/1987**
3a. Date of Last Report: **05/01/1994**

2. Principal Place of Business — 21
Suite Apt # or Bldg — 22
City, State — 23
24 — 25

2a. Mailing Address — 26
Suite Apt # or Bldg — 27
City, State — 28
29 — 30

4. FEI Number: **59-2788698** — 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 elected to participate under Section Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
FREEMAN, PAUL H.
9100 S. DADELAND BLVD.
SUITE 1406
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 Section 607.0505, 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

12. OFFICER AND DIRECTOR

TITLE	DPS
NAME	WEISS, JERRY L.
STREET ADDRESS	9000 SE 87TH CT, #115
CITY, ST, ZIP	MIAMI FL
TITLE	AS
NAME	FREEMAN, PAUL H.
STREET ADDRESS	9100 S. DADELAND BLVD.
CITY, ST, ZIP	MIAMI FL

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS

TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	☐ Change ☐ Addition
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TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

14. I hereby certify that the information supplied with this report is accurate. I further certify that the information contained in this annual report or amended 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 named above or I have been authorized to execute the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of the report or I have attached my name with an address.

SIGNATURE:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date

Paul H. Freeman, Asst. Secretary

0167441 CP