APPROVED SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97; \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.) PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION 97 AUG 15 PM 12: 23 Sandra B. Mortham **ANNUAL REPORT** Secretary of State SECRETARY OF STATE TALLAHASSEE. FLORIDA 1997 DIVISION OF CORPORATIONS DOCUMENT # M51386 (4) L.A.L., INC. Principal Place of Business Mailing Address 3800 S. OCEAN DRIVE 3800 S. OCEAN DRIVE HOLLYWOOD FL 83019 HOLLYWOOD FL 33019 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report 05/04/1987 03/19/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-2803471 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apl. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country $Z_{\rm ID}$ Country This corporation owes or has paid the current year Intangible Yes 24 29 30 Personal Property Tax due June 30. 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent KIRSCH, BRUCE J 81 Name 3800 S. OCEAN DRIVE Street Address (P.O. Borgon on 1972) 2007 -- 01020 -- 010 82 **SUITE 218** HOLLYWOOD FL 33019 83 ****165.00 ****165.00 84 Zip Code City 85 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** Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12, OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TITLE 1.1 TITLE LANZA, ROBERT NAME 1.2 NAME 2641 E. MARINA DRIVE STREET ADDRESS 1.3 STREET ADDRESS FT. LAUDERDALE FL 33317 CITY-ST-ZIP 1.4 CITY-ST-ZIF DELETE Change Addition TITLE 2.1 TITLE EGURIN, HYMAN 2.2 NAME 8970 S. HOLLYBROOK BLVD. 2.3 STREET ADDRESS STREET ADDRESS PEMBROKE PINES FL 33024 2.4 CITY - ST-ZIF CITY-ST-2IP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP Change DELETE Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-ZIP 5 4 CITY-ST-ZIF DELETE Change Addition 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 6.4 CITY-ST-ZIF CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 of the loceiver or trustee empowered to execute this leport 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 oddress.

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8/12/97

(954) 456-8274

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