FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

CORPORATION ANNUAL REPORT 1998 DOCUMENT #



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

(2)

L. B. C. SERVICES, INC.

FILED May 04 1998 8:00am Secretary of State

Principal Plac	e of Business	Mailing Address		I ##############################	141 311 01 61311 6161 61911 1661
1601 N.W. 16TH STREET 1601 N.W. 16TH STREET					
FORT LAUDERDALE FL 33311 FORT LAUDERDALE FL 333					
ł				DO NOT WRITE IN THIS	S SPACE
				 Date Incorporated or Qualified 03/09/1988 	
2. Principal P	lace of Business	2a, Mailing Address		4. FEI Number	Applied For
21		26		65-0037829	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the co	_ ' = '
24	25 S. Name and Address of Curre	29	30	Personal Property Tax due June 30.	Yes No
		ent negistered wyent	B1 Name	10. Name and Address of New Registered	Agent
COOTAIN, DRAIN					
1601 NW 16TH ST			82 Street Add	fress (P.O. Box Number is Not Acceptable)	
ļ f i	LAUDERDALE FL 33311		83		
			55		
1			84 City	F	85 Zip Code
44 Pursuant	to the provisions of Sactions 607 Of	SO2 and GO7 1509 Florido Statut	as the above named car		
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 hance of registered a	noord and the if acul cable (NC)	E Registered Agent signature requ	ired when reinslating) DATE	
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	DS	DELETE	1.1 TITLE		Change Addition
NAME	COUTAIN, LEROY A		1.2 NAME		
STREET ADDRESS	1601 N.W. 16TH STREET		1.3 STREET ADDRESS		
CITY-ST-ZIP	FT. LAUDERDALE FL		1.4 CITY - ST - ZIP		İ
TITLE	OP P	DELETE	2.1 TITLE		Change Addition
NAME	COUTAIN, BRIAN		2.2 NAME	;	
STREET ADDRESS	1601 N.W. 16TH STREET		2.3 STREET ADDRESS		
CITY-ST-ZIP	FT. LAUDERDALE FL		2. 4 CITY - ST - ZIP		
TITLE	DV	☐ DELETE	3.1 TITLE		Change Addition
NAME	COUTAIN, CLINTON		3.2 NAME		
STREET ADDRESS	1601 N.W. 16TH STREET		3 3 STREET ADDRESS		ł
CITY-ST-ZIP	FT. LAUDERDALE FL		3 4. CITY - ST - ZIP		
TITLE		L DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME	ł		5.2 NAME		1
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		Floriere	5.4 CITY-ST-ZIP		
TITLE		DELETE	61 TITLE		Change Addition
NAME			62 NAME		ļ
STREET ADDRESS			63 STREET ADDRESS		
CITY-\$T-ZIP	artiful that the information of	with this tilius does not a self to	6.4 CITY-ST-ZIP	Castian 110 07(0)(i) Florida Otas tra 17 15	

I nereby 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 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.