

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # M91606

(7)

1. Corporation Name

BURMA TEAK, INC.

Principal Place of Business

6050 PALMER BLVD.
SARASOTA FL 34232

Mailing Address

6050 PALMER BLVD.
SARASOTA FL 34232



3. Date Incorporated or Qualified
07/11/1988

3a. Date of Last Report
03/03/1995

2. Principal Place of Business

2a. Mailing Address

21

State, Apt. #, etc.

26

State, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FITZGIBBONS, THOMAS M.
FIRST FLORIDA BANK PLAZA, SUITE 775
1800 SECOND ST.
SARASOTA FL 34236

81 Name

LARS LEWANDER

82 Street Address (P.O. Box Number is Not Acceptable)

6050 PALMER BLVD

83

84 City

SARASOTA

FL

85 Zip Code

34232

11. Pursuant to the provisions of Sections 607.0502 and 607.1503, 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 or its board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0503, Florida Statutes.

SIGNATURE

Thomas M. Fitzgibbons

96/2/22

12. OFFICERS AND DIRECTORS

1. TITLE	DP	LEWANDER, LARS	☐ DELETE
2. NAME		3403 12TH AVE EAST	
3. STREET ADDRESS		BRADENTON FL	
4. CITY - ST - ZIP			
1. TITLE	DS	LEWANDER, ANN	☐ DELETE
2. NAME		3403 12 AVE EAST	
3. STREET ADDRESS		BRADENTON FL	
4. CITY - ST - ZIP			
1. TITLE			☐ DELETE
2. NAME			
3. STREET ADDRESS			
4. CITY - ST - ZIP			
1. TITLE			☐ DELETE
2. NAME			
3. STREET ADDRESS			
4. CITY - ST - ZIP			
1. TITLE			☐ DELETE
2. NAME			
3. STREET ADDRESS			
4. CITY - ST - ZIP			

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. 1. TITLE	☐ Change ☐ Addition
2. 2. NAME	
3. 3. STREET ADDRESS	
4. 4. CITY - ST - ZIP	
5. 5. 1. TITLE	☐ Change ☐ Addition
6. 6. 2. NAME	
7. 7. 3. STREET ADDRESS	
8. 8. 4. CITY - ST - ZIP	
9. 9. 1. TITLE	☐ Change ☐ Addition
10. 10. 2. NAME	
11. 11. 3. STREET ADDRESS	
12. 12. 4. CITY - ST - ZIP	
13. 13. 1. TITLE	☐ Change ☐ Addition
14. 14. 2. NAME	
15. 15. 3. STREET ADDRESS	
16. 16. 4. CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 person or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Book 12 or Book 13 if changed from an attached report with an address.

SIGNATURE:

Lars Lewander

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

96/2/22

3774100

CR2E034 (12/95)