## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT **CORPORATION** ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 10 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUI 1. Corporatio LAKES			JOOO5035 (9 JM ASSOCIATION, INC	•					
Principal Plac	e of Business	<del></del>	Mailing Address	Mailing Address			8144 8811 8811 8811 8811	IANG <b>BU</b> RBA <b>Bi</b> rik <b>Ba</b> i <b>ra</b>	HIND I BOOK INST
307 SOUTH 21ST AVENUE HOLLYWOOD FL 33020			307 SOUTH 21ST AVENUE HOLLYWOOD FL 33020-5011						
						3. Date Incorporated 10/24/1995		n. Date of Last Ro 04/20/199	
2. Principal P	lace of Busine	ess	2a. Mailing Address			4. FEI Number 65-0613843	2	<del></del>	plied For
21 Sulte, Apt.	#. etc.		26 Suite, Apt. #, etc.			-		60.75	t Applicable
22	.,		27			5. Certificate of Status	s Desired 🔲	Fee Re	
City & State	в	<del></del>	City & State			6. Election Campaign	Financing	\$5.00	May Be
23			28			Trust Fund Contrib	ution 🔲		
Zip		Country	Zip Country		У	This corporation has			199.032,
24		5 nd Address of Curre	29 ni Registered Agent	[30]	70 Florida Statutes Yes No				
e, rame and manager of contract to go to the manager.						101 11111111111111111111111111111111111		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
KORN, GARY					Street A	set Address (P.O. Box Number is Not Acceptable)			
20803 BISCAYNE BLVD. STE 200					<u> </u>	TOOLESS (I .O. DOX Mullicol 18			
AVENTURA FL 33180					-				
		64	1 "			FL 85 Zip (			
11. Pursuant	to the provisio	ns of Sections 617.050	02 and 617.1508, Florida Statu of Florida. Such change was ations of, Section 617.0503, F	ites, the abov	e-named c	corporation submits this stater	ment for the purpo	se of changing its	s registered
agent. I a	m familiar with	n, and accept the oblig	ations of, Section 617.0503, F	lorida Statute	y me corpu s.	prations board or directors. I	пегеру ассерстве	appointment as	regisiered
SIGNATURE .							·····		
12.	Signature, typed o	printed name of registered ag OFFICERS AN				ADDITIONS/CHANG		AND DIRECTOR	S IN 12
TITLE			DELETE	E.1 TITLE		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Change	Addition
-NAME		Herbert		1.2 NAME					]
STREET ADDRESS			1.3 STREET ADDRESS		T ADDRESS				);
CITY+ST-ZIP		OOD FL 33020		1.4 CITY -	ST-ZIP				
TITLE	۷D		☐ DELETE	2.1 TITLE	ſ			☐ Change	Addition
NAME	BIRDMAN, HARVEY			2.2 NAME					
STREET ADDRESS	11011181100B MI 00000		2.3 STREET ADDRE		·				
CITY-ST-ZIP TITLE	HOLLYWOOD FL 33020  VSD DELETE		2.4 CITY- 3.1 TITLE	ST-ZIP	·	·	Change	Addition	
NAME		BIRDMAN, LOUIS		3.1 THEE				Unange	L. AVOIDOR
STREET ADDRESS		TH 21ST AVENUE		1	T ADDRESS				1
CITY-ST-ZIP		OOD FL 33020		3.4. CITY-					
TITLE	Vī		☐ DELETE	4.1 TITLE				☐ Change	Addition
NAME	BIRDMAN			4. 2 NAME					į
STREET ADDRESS		TH 21ST AVENUE		4.3 STREE	T ADDRESS				
CITY-ST-ZIP	HOLLYWO	OOD FL 33020		4.4 C(TY-	ST-ZIP				
TITLE	·		☐ DELETE	5.1 TITLE				☐ Change	• Addition
NAME	 			5.2 NAME	1				-
STREET ADDRESS	1			I.	TADDRESS				
CITY-ST-ZIP TITLE	<u> </u>		DELETE	5.4 C/TY - 1 6.1 TITLE	ST-ZIP		<del></del>	Change	Addition
NAME			C preet	6.2 NAME					Addition
STREET ADDRESS				1	T ADDRESS				1
CHILLY MODILES				OBSTREE	. ADDITION				- 1

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 or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address. VICE President/ 1/2 har landan