

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2004 8:00 am
Secretary of State

04-19-2004 90370 032 ***150.00

DOCUMENT # P01000039432

1. Entity Name
L.C. OF FT. LAUDERDALE, INC.



Principal Place of Business
901 E SAMPLE RD UNIT G
POMPANO BEACH, FL 33064

Mailing Address
901 E SAMPLE RD UNIT G
POMPANO BEACH, FL 33064

14004569



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04062004

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number
65-1093280

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORREA, DIANA M
901 E SAMPLE RD UNIT G
SUNRISE, FL 33351

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

(Signature, typed or printed name of registered agent and principal also table.)

(NOTE: Registered Agent signature required when refreshing)

DATE

4-13-04

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete
NAME CORREA, DIANA M
STREET ADDRESS 9631 NW CT
CITY-ST-ZIP SUNRISE, FL 33351

TITLE P ☐ Delete
NAME LOGUE, ANTHONY
STREET ADDRESS 8930 OLD PINE RD
CITY-ST-ZIP BOYNTON BEACH, FL 33437 Boca Raton FL 33433

TITLE ☐ Delete
NAME ~~Joseph A. Correa~~
STREET ADDRESS ~~9631 NW 44CT~~
CITY-ST-ZIP ~~SUNRISE, FL 33351~~

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP Boca Raton FL 33433

TITLE ☐ Change ☒ Addition
NAME Treasurer
STREET ADDRESS Correa, Joseph A.
CITY-ST-ZIP 9631 NW 44CT
SUNRISE, FL 33351

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

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

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

Date

Daytime Phone #

4-13-04 (954)
328-7658