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

PROFIT CORPORATION ANNUAL REPORT

1996

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR



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

1. Corporati	JMENT # P920(on Name LAR OUTLET, INC.	00003702 ((7)	1 182/HEA (18 18/18) AAN 18	1834 8814 8844 8844 8846 3444 8884 8844 8844 884
Principal Place	ce of Business	Marine Add			
4539 S KIRKMAN RD #7 ORLANDO FL 32811		Mailing Address 4628 S ORANGE B ORLANDO FL 32839 US	LOSSOM TRAIL		aanu garu garaa sirii 1884 6846 (186 1 9 6
2. Principal F	Place of Business			3. Date Incorporated or Qualified 11/12/1992	3a. Date of Last Report 05/01/1995
21		2a. Mailing Address		4. FEI Number 59-3150158	Applied For
Suite, Apt. 22 City & Stat		Suite, Apt. #, etc. 27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
23		City & State		6. Election Campaign Financing	\$5.00 May Be
<i>Z</i> ₁p 24	Country 25	Zip	Country	Trust Fund Contribution 8. This corporation has liability for	Added to Fees
	9. Name and Address of Current	Registered Agent	[30]	Florida Statutes 🔀 Yes	□No
KhA			81 Name	10. Name and Address of New R	legistered Agent
KHNA	, ABUL			Mana (B.O. DayAl	
4628 S ORANGE BLOSSOM TRAIL ORLANDO FL 32839				Address (P.O. Box Number is Not Acceptable)	
· · · · · ·	150 1 E 0E000		83		
44.5			84 City		85 Zip Code
	to the provisions of Sections 607,0502 a led agent, or both, in the State of Florida th, and accept the obligations of, Section	nd 607.1508, Florida Statute Such change was authorize 1607.0505, Florida Statutes	es, the above-named corp and by the corporation's bo	poration submits this statement for the purporation of directors. I hereby accept the apporations of directors are provided in the purporation of directors.	pose of changing its registered office oin/ment as registered agent. I am
SIGNATURE	Slorange , o or printed name of registered agent an			\mathcal{J}^{r}	14/96
12. Title	OFFICERS AND		Hegistered Agent signature reou 13.	ADDITIONS/CHANGES TO OFFI	CECC AND DIDECTORS II
NAME	KHAN, ABUL H	DELETE	1. 1 TITLE	3.3.4020 10 0111	Change Addition
STREET ADDRESS	4628 S ORANGE BLOSSOM ORTLANDO FL	TRAIL	1.3 STREET ADDRESS		
TITLE	D	[] DELETE	1.4 CITY - ST - Z.P 2. 1 TILLE		
NAME Ototsky and the	KHAN, KAUSAR 4628 S O B T		2 2 NAME		Change Addition
STREET ADDRESS CITY-ST-ZIP	ORLANDO FL		23 STREFT ADDRESS	4.	
TITLE		[] DELETE	24 CITY - ST - ZIP 3 1 TITLE		
NAME			3.2 NAME		Change Addition
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY - \$1 - ZIP		
NAME		☐] DELETE	4. 1 TITLE		Change Addition
STREET ADDRESS			4.2 NAME		
CiTY-ST-ZiP			4.3 STREET ADDRESS 4.4 CHTY-ST-ZIP		ŀ
TITLE		☐ DELETE	5. 1 TITLE		Change Addition
NAME STREET ADDRESS			5.2 NAME		Change Addition
STREET ADDRESS CITY-ST-ZIP			5.3 STREET ADDRESS		
TITLE		□ DETETE	5 4 C'TY+ST-ZIP		
NAME		F"] DELETE	6. 1 711LE		Change Addition
STREET ADDRESS			6.2 NAME 6.3 STREET ADDRESS		
CITY-ST-ZIP					
certify that the oath; that I a appears in B	cering that the information supplied with ne information indicated on this annual re am an officer or director of the corporation Block 12 or Block 13 if shanged, or on a	this fling is voluntarily furnish sport or supplemental armua in or the receiver or trustee e n attachment with an addres	ed and does not qualify f	or the exemption stated in Section 119.07 to and that my signature shall have the sa s report as required by Chapter 607, Floric	(3)(k), Florida Statutes. I further me legal effect as if made under da Statutes; and that my name

(407)857-2676