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Feb 02 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998

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



DOCUMENT # P92000015393 (1)

1. Corporation Name
L.R.M. INVESTMENT CORP.



Principal Place of Business: 2101 CORPORATE BLVD. SUITE #216 BOCA RATON FL 33431-7343 US

Mailing Address: 2101 CORPORATE BLVD SUITE #216 BOCA RATON FL 33431-7343 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: 21 Suite, Apt. #, etc. City & State Zip Country

2a. Mailing Address: 26 Suite, Apt. #, etc. City & State Zip Country

3. Date Incorporated or Qualified: 12/31/1992

4. Fed Number: 65-0377708 Applied For: Not Applicable

5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Election Campaign Financing: \$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent: INC. M & W AGENTS 2101 CORPORATE BLVD. SUITE #216 BOCA RATON FL 33431

10. Name and Address of New Registered Agent: 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.01(2)(c) and 607.01(2)(d), 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 this appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.01(2)(c), Florida Statutes.

SIGNATURE: *[Signature]*

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHARGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: RD	NAME: CHAVES, LEON	11 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS: 2101 CORPORATE BLVD., SUITE #216	CITY, ST, ZIP: BOCA RATON FL	12 NAME:	
TITLE: VD, P	NAME: CHAVES, MARK	13 STREET ADDRESS:	
STREET ADDRESS: 2101 CORPORATE BLVD., SUITE #216	CITY, ST, ZIP: BOCA RATON FL	14 CITY, ST, ZIP:	
TITLE: STD	NAME: CHAVES, ROBERT	15 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS: 2101 CORPORATE BLVD., SUITE #216	CITY, ST, ZIP: BOCA RATON FL	16 NAME:	
TITLE: <i>[Signature]</i>	NAME: <i>[Signature]</i>	17 STREET ADDRESS:	
STREET ADDRESS: <i>[Signature]</i>	CITY, ST, ZIP: <i>[Signature]</i>	18 CITY, ST, ZIP:	
TITLE: S. VP	NAME: FAY CHAVES	19 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS: 2101 CORPORATE BLVD #216	CITY, ST, ZIP: BOCA RATON, FL	20 NAME:	
TITLE: <i>[Signature]</i>	NAME: <i>[Signature]</i>	21 STREET ADDRESS:	
STREET ADDRESS: <i>[Signature]</i>	CITY, ST, ZIP: <i>[Signature]</i>	22 CITY, ST, ZIP:	

14. I hereby certify that the information supplied with this filing complies with the requirements for the exemption set forth in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report is supplemental information and 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 of the corporation, and that I am authorized to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report as an officer or director of the corporation.

SIGNATURE: *[Signature]* 1/08/98

CR20084 (10/97)