FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9300000337

LISBETH OSLO, INC.

Principal Place of Business 268 NW 119 ST

Mailing Address

2501 NE 11TH STREET

FILED

Jul 08, 1999 8:00 am Secretary of State

07-08-1999 90031 049 ***550.00

. MIAMI FL 33167		Suite 1 Ft. Lauderdale Fl. 33304				DO NOT WRITE IN THIS SPACE					
		US					3. Date Incorporated or Qualifed				
							12/28/1992				
Principal Place of Business 2a. Mailing Ac			Mailing Address	g Address .			4. FEI Number		Applied For		
1		26 1268 NW 119 st,1					65-0378600		Not Applicable		
Suite, Apt. #, e	tc.	27	Suite, Apt. #, etc. Pl. 33167			33167	5. Certificate of Status Desired \$8.75 Addition. Fee Required				
City & State			City & State				6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip	Country 25		Zip Cour		untry		This corporation owes the current year I Personal Property Tax.	Intangible Yes	ŒNo		
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent						
					81	1 Name Anne-L. Dalal					
2501 NE 11TH STREET				82	Street Address (P.O. Box Number is Not Acceptable)						
			83								
					84		FL 33				
		500	7 4500 F1 C4-44	4 466		samed saran	ration authorite this atatament for the nurnees	of changin	o its registered		

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE	Signature, typed or printed name of registered agent and title if applicable	(NOTE: Rec	gistered Agent signature re	aguired when reinstating)		DATE	 .	
	OFFICERS AND DIRECTORS	(NOTE: Ne	13.	 _	CHANGES TO OFFICE	ERS AND	DIRECTOR	S IN 12
12.	D	☐ DELETE	1.1 TITLE	Dres			Change	Addition
NAME	DALAL, ANNE L	_	1.2 NAME	Anne-L.	Dalal grape Cir FL: 3336			ŀ
STREET ADDRESS	2501 NE 11TH STREET SUITE NO 1		1.3 STREET ADDRESS	1295 Sea	grape Cir	de		}
CITY-ST-ZIP	FORT LAUDERDALE FL 33304		1.4 CITY-ST-ZIP	Weston	PL: 3338	26		
nne	D	☐ DELETE ·	2.1 TITLE				Change	☐ Addition
VAME	DALAL, ROGER		2.2 NAME					
STREET ADDRESS	3703 BRIDGE ROAD		2.3 STREET ADDRESS					ļ
CITY-ST-ZIP	COOPER CITY FL 33024		2. 4 CITY-ST-ZIP					
TITLE		☐ DELETE	3.1 TITLE				Change	☐ Addition
VAME			3.2 NAME]
STREET ADDRESS			3.3 STREET ADDRESS					1
CITY-ST-ZIP			3.4. CITY-ST-ZIP					
TITLE		☐ DELETE	4.1 TITLE			!	Change	☐ Addition
NAME			4.2 NAME					
STREET ADDRESS			4.3 STREET ADDRESS					
OTTY-ST-ZIP			4.4 CITY-ST-ZIP					
TITLE		☐ DELETE	5.1 TΠLE				Change	☐ Addition
VAME			5.2 NAME					
STREET ADDRESS		j	5.3 STREET ADDRESS					
CITY-ST-ZIP			5.4 CITY-ST-ZIP					
TITLE		☐ DELETE	6.1 TITLE				Change	☐ Addition
NAME			6.2 NAME					i
STREET ADDRESS			6.3 STREET ADDRESS					
City-ST-ZIP			6.4 CITY-ST-ZIP					

14. 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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.