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

**PROFIT CORPORATION ANNUAL REPORT** 

1997

CITY - ST - ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

NAME

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9300004688 (6)

LABATE	HOLDINGS, INC.					
Principal Place 1149 N FEDER FORT LAUDER US		Mailing Address 1149 N FEDERAI FORT LAUDERD/ US	HWY	1423		1 <b>39</b> 11/ 8011/ <b>02</b> 114 81014 8110/ (818) 121) <del>1</del> 00)
					3. Date Incorporated or Qualific 01/21/1993	ed 3a. Date of Last Report 04/23/1996
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			65-0384886	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24	Country 25	Zip <b>29</b>	30	Country	8. This corporation has liability Florida Statutes	for intengible tax under s. 199.032,  Yes No
	9. Name and Address of Cur	rent Registered Agent			10. Name and Address of New	Registered Agent
	to the provisions of Sections 607.0 egistered agent, or both, in the Start familiar with, and accept the ob	0502 and 607, 1508, Floridate of Florida, Such chan digations of, Section 607	la Statutes, t ge was autho 0505, Florida	84 City the above-named corporated by the corporal Statutes.	poration submits this statement for t tion's board of directors. I hereby ac	FL 85 Zip Code he purpose of changing its registered ccept the appointment as registered
SIGNATURE	Signature typed or printed name of registered	agent and title if applicable	(NOTE: Rog	sistered Agent signature requi	ired when reinstating)	DATE
12.		AND DIRECTORS	Ī	13.	ADDITIONS/CHANGES TO OF	FICERS AND DIRECTORS IN 12
TIFLE NAME STREET ADDRESS	PD LABATE, JAMES B 101 NE THIRD AVE STE 30 FT. LAUDERDALE FL	<b>D</b> E	LETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS		Change Addition
CITY-S1-ZIP TITLE	S	DE	LETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
NAME .	LABATE, MARK J	<del></del>		2.2 NAME		Cronide Ci vanimi
STREET ADDRESS .	101 NE THIRD AVE STE 30 FT. LAUDERDALE FL	D		2.3 STREET ADDRESS 2.4 CHY-ST-ZIP		
TITLE		☐ DE		31 TITLE		Change Addition
NAME				32 NAME		
STREET ADDRESS				33 STREET ADDRESS		
CITY-ST-ZIP				34 CITY-ST-ZIP		
TITLE		☐ D€		4.1 TITLE		Change Addition
NAME				4 2 NAME		
STREET ADDRESS				4 3 STREET ADDRESS		

CITY-ST-ZIP 6.4 CITY-ST-ZIP 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 enpowered 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 an attachmon with an address.

44 CITY-ST-ZIP

5 3 STREET ADDRESS

6.3 STREET ADDRESS

54 CITY-ST-ZIP

51 TITLE

5 2 NAME

61 TITLE

62 NAME

DELETE

DELETE

\_\_\_ Change

☐ Change

Addition

Addition

**FILED** 

Feb 18 1997 8:00am

Secretary of State