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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

May 08 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000007170 (2)

L.P.J. INVESTMENT COMPANY

Principal Place	of Business	Mailing Address				4 144 118 11 110 14105 11111 44111 44111 44111 44111 44111 44111 44111 44111 44111 44111 44111 44111 44111 441	*** (###1	DIRIT IRRI GRIT IRRI				
1108 RIDGEWOOD AVE. HOLLY HILL FL 32117		1108 RIDGEWOOD AVE. HOLLY HILL FL 32117			DO NOT WRITE IN THIS SPACE							
						3.	Date Incorporated or Qualified 01/28/1993					
2. Principal Place of Business		2a, Mailing Address				4.	, FEI Number	ļ	Applied For			
21		26				1_	59-3162228		Not Applicable			
Suite, Apt. #, etc.		Suite, Apt. #, etc.	├ ── `			Б.	Certificate of Status Desired		.75 Additional Fee Required			
City & State		City & State				6.	Election Campaign Financing Trust Fund Contribution		5.00 May Be			
Zip 24	Country 25	Zip 29	30 Cou	intry		8.	This corporation owes or has paid the corporation owes or has paid the corporate Tax due June 30.	irrent y				
	g. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent						
	ERNDORF, MARYELLEN P			81	Name							
1	South Palmetto ave. Tona Beach FL 32114		82 Street Ad			dress (P.O. Box Number is Not Acceptable)						
				83								
				84	City		F	85	Zip Code			
11. Pursuant to	the provisions of Sections 607.05	02 and 607.1508, Florida Sta	atutes, the al	DOVE	a-named corp	oratio	on submits this statement for the purpose	of chan	ging its registered			

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

	Signature, typed or printed name of registered agent and title if as		E Registered Agent signature requi	red when reinstating)	DATE	
12.	OFFICERS AND DIRECTO	·	13.	ADDITIONS/CHANGES TO	O OFFICERS AND DIRECTOR	
ITLE	D	☐ DELETE	1.1 TITLE	_	☐ Change	Addition
IAME	OLIVA, JOHN W		1.2 NAME			
TREET ADDRESS	1108 RIDGEWOOD AVE.		1.3 STREET ADDRESS			
CITY-ST-ZIP	HOLLY HILL FL 32117		1.4 CITY-ST-ZIP			
ITLE	D	DELETE	2.1 TITLE		☐ Change	Additio Additio
NAME (OLIVA, LAURENCE A		2 2 NAME			
TREET ADDRESS	1106 RIDGEWOOD AVE.		2.3 STREET ADDRESS			
CITY-ST-ZIP	HOLLY HILL FL 32117		2.4 CITY - ST - ZIP			
TTLE .	D	☐ DELETE	3.1 TITLE		☐ Change	Additio
IAME	OLIVA, PATRICIA A		3 2 NAME			
TREET ADDRESS	1108 RIDGEWOOD AVE.		3.3 STREET ADDRESS			
CITY-ST-ZIP	HOLLY HILL FL 32117		3.4. CITY-ST-ZIP			
ITLE		DELETE	4.1 TITLE		Change	Additio
IAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		DELETE	5.1 TITLE		Change	Additio
IAME			5.2 NAME			
TREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
ITLE		DELETE	61 TITLE		Change	Additio
IAME			6 2 NAME			
TREET ADORESS			6.3 STREET ADDRESS			
NTV 0T 310			A 4 0/7/ AT T/D			

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 correction or the receiver or trustee empowered to execute his 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.

Patricia A. Oliva 4/30/98 904255-6283