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

PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUI	MENT # P9300	0011262 (1)			
	L ENTERPRISES, INC.		•			
Principa' Place	of Business	Mairing Address		···		
7400 RADICE	E CT	7400 RADICE CT				
#305		#305				
LAUDERHILL US	FL 33319	LAUDERHILL FL 333 US	19	3. Date incorporated or Qualified	3a. Date of Last Report	
		•		02/15/1993	03/29/1995	
2. Principal Pia	ace of Business	2a. Mailing Address		4, FEI Number	Applied For	
21	# oto	26		65-0466949	Not Applicab	
Suite, Apt. (н, етс.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
City & State		City & State		6. Flection Campaign Financing	Fee Required	
23		28		Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Ζφ	Country	8. This corporation has liability for	·	
24	25	29	30		X No	
	g, Name and Address of Curren	i Hegistered Agent	81 Name	10. Name and Address of New F	legistered Agent	
SCHWA	RTZ, HARRIET					
	ADICE CT		82 Street Addr	ess (P.O. Box Number is Not Acceptat	le)	
#305			83			
LAUDER	HILL FL 33319		84 City			
			'		FL 85 Zip Code	
11. Pursuant to or registere	o the provisions of Sections 607.0502	and 607.1508, Florida Stat.	ites, the above named corpor	ation submits this statement for the put id of directors. Thereby accept the app	pose of changing its registered offic	
familiar witi	h, and accept the obligations of. Secti	on 607.0505, Florida Statute	28.	or or orectors. Thereby accept the app	orithent as registered agent. Fami	
SIGNATURE _	Styriatine, typed or printed harne of registered agent	end the the object of	Title: Registered Agents gradere requise	turn a control		
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12	
hille	D	DELETE	1 1 Title		Change Addition	
NAME:	SCHWARTZ, HARRIET		1.2 NAME			
STREET ADDRESS	7400 RADICE CT.		13 STREET ADDR: SS			
CHY-ST-ZIP	LAUDERHILL FL 33319	C buta	1.4 CITY - \$1 - 71P			
TITLE NAME		DELETE	2 1 HILE		Change Maddition	
STREET ADDRESS			2.2 NAME	•		
CHTY-ST ZIP			2.3 STREET ADDRESS 2.4 CITY - ST. ZIP			
TITLE		DELFTE	3 1111/2		Change Addition	
NAME			3.2 NAME		C	
STHEET ADDRESS			3.3 STREET ADDRESS			
C(TY - S* - 7)P		·	3.4 CIFY - ST - 7IP			
THE		□ DELETE	4 111"LE		Change Addition	
NAME			4.2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP TITLE		DELE 1E	4.4 C(1Y - S1 - Z(f)		Change C Addition	
NAME			5 2 NAMe		Charige Addition	
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST ZIF			5.4 City - St - 2iF			
TITLE		DEVETE	6 1 TILLE		Change Addition	
NAME			6.2 NAME		· -	
STHEEL ADDRESS			6.3 STREET ADDRESS			
CITY ST-ZIP	244 Ab - 14 Ab		6.4 CITY - ST - 7IP			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualfy for the exemption stated in Section 119 07(3)(k). 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 Brock 13 if changed, or on an attachment with an address.

SIGNATURE: K GUSTUK KILLUS / SIGNING OF SIGN