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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1998 DOCUMENT # P93000022950 (8)

FILED May 05 1998 8:00am Secretary of State

LAVEZ,	INC.		A		
		•			
Principal Plac	e of Business	Mailing Address		- I JOÉAIREO (18 (DISE JAN) ERIN ERIN BRAN ERIN	HETE HISTO PARON BANN BEGIN 1881
1527 MAIN ST. 3138 TIMBERVIEW DRI		3138 TIMBERVIEW DRIVE			
1		DUNEDIN FL 34698 US		DO NOT WRITE IN THIS SPACE	
03		US		3. Date Incorporated or Qualified	
]				03/25/1993	Ì
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-3172223	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	Α	City & State		6. Election Campaign Financing	
23	-	28		Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
24	25		30	Personal Property Tax due June 30.	Yes No
	9, Name and Address of Currer	nt Registered Agent	nd N	10. Name and Address of New Registers	d Agent
	YER, DAVID A		81 Name		
	RUDNICK & WOLFE		82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
1	i e kennedy blyd Suite 2000 MPA Fl 33602-5133	į	83		
1/4	MFM FL 33002-3133				
			84 City	F	85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named					
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 registers 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					
40	Signature, lyped or profed name of registered age	out and tilic if applicable (NOTE) D DIRECTORS	Registered Agent signature require 13.	ad when reinstaling) DATE ADDITIONS/CHANGES TO OFFICERS A	
12.	D OFFICEAS AIN	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	LAVEZZO, JOHN S		1.2 NAME		
STREET ADDRESS	3138 TIMBERVIEW DRIVE		1.3 STREET ADDRESS		
CITY-ST-ZIP	D UNEDIN FL		1.4 CITY - ST - ZIP		
TITLE	D	DELETE	2.1 TITLE		Change Addition
NAME	LAVEZZO, PAULA J		2.2 NAME		
STREET ADDRESS	\$138 TIMBERVIEW DRIVE		2.3 STREET ADDRESS		
CITY-ST-ZIP	DUNEDIN FL		2. 4 CITY - ST - ZIP		
TITLE		L_] DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	3.4. C(TY-ST-Z)P 4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		İ
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		····	5.4 CITY-ST-ZIP		
TITLE		DELETE	61 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		

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

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