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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000037571

1. Corporation Name

LOA CORPORATION

FILED Feb 20, 1999 8:00 am Secretary of State

02-20-1999 90030 001 ***150.00

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Principal Place	e of Business	Mailing Addres	S				1 18811961 ()m imtem ()itt g	#151 ## 111 ## 113 ## 111		6561 1161 1667
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2. Principal P	lace of Business	2a. Mailing Add	dress				4. FEI Number			olied For
21		26					65-0401937			Applicable
Suite, Apt.	#, etc.	Suite, Apt. #	#, etc.				5. Certifcate of Status Desire	ed 🗌	\$8.75 A Fee Re	
City & State	e	City & State	e				6. Election Campaign Finance	cina	\$5.00	
23	-	28					Trust Fund Contribution	Cing [Added to	
Zip	Country	Zip		Cour	ntry		8. This corporation owes the	current year la	ntangible	
24	25	29	ſ	30			Personal Property Tax.	•		□No
	9. Name and Address of Curre		<u> </u>	' I			10. Name and Address of N	lew Registere	d Agent	
					81	Name				İ
	o, elsa			-	82	Stroot Addro	ess (P.O. Box Number is Not Ac	centable)		
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HIAL	EAH FL 33010				83					
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office or re	egistered agent, or both, in the Stat	e of Florida. Such cha	rida Statute nge was au	s, the ab thorized	ove- by th	-named corpo he corporation	oration submits this statement for in's board of directors. I hereby	accept the app	ointment as reg	istered
office or re	egistered agent, or both, in the Stat m familiar with, and accept the oblig	e of Florida. Such cha gations of, Section 607	nge was au 7.0505, Flori	ithorized ida Statu	by ti	he corporation	n's board of directors, I hereby a	accept the app	ointment as rec	pistered
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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 an attachment with an address, with all other like empowered.

SIGNATURE: