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

PROFIT CORPORATION ANNUAL REPORT 1998



Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT #**1, Corporation Name P93000048438 (4)

L & R SERVICES, INC.

Principal	Place	of	Business		

Mailing Address

11151 83RD LANE NORTH

11151 83RD LANE NORTH

## **FILED** Apr 30 1998 8:00am Secretary of State



LAKE PARK FL 33412	LAKE PARK FL 33412						
				DO NOT WRITE IN THIS SPACE			
				3. Date Incorporated or Qualified			
				07/02/1993			
2. Principal Place of Bysiness	2a. Mailing Address		0 -0	4. FEI Number	L	Applied For	
15aint Giles Rd	20 1 Saint Gile	22	Ka	65-045 <u>15</u> 16		Not Applicable	
Suite, Apl. #, etc.	27 Pe, Apt #, etc.			5. Certificate of Status Desired		.75 Additional se Required	
AREMBON GONS Fla	28 Palm Bon Gdr	15	Pla	6. Election Campaign Financing Trust Fund Contribution		5.00 May Be dded to Fees	
Zip Country 4 33418 25 USA	29 73348 30 °°		54	This corporation owes or has paid the cu     Personal Property Tax due June 30.	rrent ye	ear Intangible	
g, Name and Address of Curre	9, Name and Address of Current Registered Agent 10, Name and Address				Agent		
ELLINGTON, RICHARD R 701 US 1, S-402 N PALM BCH. FL 33418		81	Name				
		82	Street Address (P.O. Box Number is Not Acceptable)				
		83					
		84	City		85	Zip Code	
					<u>-                                    </u>		
agent. I am familiar with, and accept the oblic	e of Florida. Such change was authorize	ed by	the corporal	poration submits this statement for the purpose of tion's board of directors. I hereby accept the app			

office or	registered agent, or both, in the State of Florida Such chan arri familiar with, and accept the obligations of, Section 607.0	ge was auth	horized by the corp	corporation's board of directors. I hereby acce	pt the appointment as	registered
SIGNATURE			<del>- , ,, , , ,</del>		DATE	
	Signature, typed or printed name of registered agent and littli if applicable	INU/E: H	<u> </u>	required when reinstating)		
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFI		
TITLE	PD DE	LETE	1 1 TITLE		☐ Change	Addition
NAME	CLARK, LISA B		1.2 NAME	a hart Glack	ond	
STREET ADDRESS	11151 83RD LANE NORTH		1.3 STREET ADDRESS	7 Jacob Sites	11. 72/10	:
CITY-SY-ZIP	LAKE PARK FL 33412		1.4 CITY - ST - ZIP	Jain+Gites K	14 32410	
TITLE	STD DE	LETE	21 TITLE		☐ Change	☐ Addition
NAME	BARILE, ANGELO J		2.2 NAME		1	
STREET ADDRESS	11151 83RD LANE NORTH		2.3 STREET ADDRESS	Palm Bock Golas. 4	( ) ( )	
CITY - ST - ZIP	LAKE PARK FL 33412		2. 4 CITY-ST-ZIP	Yalm Bock bars, 4	L 3348	
TITLE	□ DEI	LETE	3.1 TITLE		Change	Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP		i	3.4. CITY - ST - ZIP			
TITLE	☐ DEI	LETE	4.1 TITLE		Change	Addition
HAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY - ST - ZIP			
TATLE	□ DEI	ETE	5.1 TITLE		Change	☐ Addition
NAME			5.2 NAME			
STREET ADDRESS			53 STREET ADDRESS			
CITY - ST - ZIP			5.4 CITY-ST-ZIP			
TITLE	☐ DEC	ETE	6.1 TITLE		Change	☐ Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY - ST - ZIP			6.4 CITY-ST-ZIP			

14. I hereby certify that the information supplied with this filing does indicated on this annual report or supplemental annual report officer or director of the corporation or the fectiver or trusted at Block 12 or Block 13 if changed or on a facchiment with an not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an appear to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

**SIGNATURE:**