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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEFARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90061 013 ***150.00

DOCUMENT # P9300073777

1. Corporation Name

LAP MAIL & BUSINESS CENTER. INC.

Principal Flac	e of Business	Mailing Address					Be #8-11 Bill	*** ***********************************	
10471 N KENDA	ALL DR.	10471 N KENDALL DR.							
B-101	B-101				DO NOT W	DITE IN T	ווני פטאפיד		
MIAMI FL 33176-1527 MIAMI FL 33176-1527					1 Ds	DO NOT Wi ate incorporated or Qualife		IIS SPACE	
				_	1 **	0/18/1993			
2. Principal P	lace of Business	2a. Mailing Address			1 "	I Number	_	A	Apolied For
21		26			65	5-0450858			Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5 Ce	ertificate of Status Desired			/ dditional	
22		27							Required
City & State		City & State				ection Campaign Financing	g 🗆		May Be
23	2	28	Count			ust Fund Contribution			to Fees
Zip	Country	Žip	Count	iy	1 **	his corporation owes the cu	irrent year	Intangible Ses	□No
24	9. Name and Address of Curr	29)	30			ersonal Property Tax. ame and Address of New	Register		
	g. Name and Address of Curr	ent Registered Agent	8	1 Name	 _	anie and Address of New	regiote.	,u Agent	
BOL	ANOS, PEDRO E			1101110					
	'1 N KENDALL DR.		8	2 Stree	t Address (P.O.	. Bo∢ Number is Not Accep	otable)		
B.10			9	3					
	Al FL 33176-1527			3					
tarit.	11 12 33 17 3 132		8	4 City			F	. 85 Zip	Code
	to the provisions of Sections 607.0			Ш.,,			-		to societore d
SIGNATURE	m familiar with, and accept the obli-	gent and title if applicable. (NO			e recuired when remst		DATE		
12.		N) DIRECTORS	13.		ADI	DITIONS/CHANGES TO C	FICERS		
TITLE	P	DELETE	1.1 TITLE		Piesio			Change	
NAME	BOLANOS, LISSETTE		1.2 NAMI		reave	N. Kendall	90.	suite 1	B-101
STREET ADDRESS	10471 N KENDALL DR.		1.3 STRE	ET ADDRESS			in/	_	
CITY-ST-ZIP	MIAMI FL 33176-1527		1,4 CITY		Mian	n, FL 33	1/6		
TITLE		☐ DELETE	2 1 TITLE					Change	Addition
NAME			2.2 NAME	Ē					
STREET ADDRESS			2.3 STRE	ET ADDRESS	s			~	
CITY-ST-ZIP			2 4 CITY			<u> </u>			
TITLE		☐ DELETE	3.1 TITLE					☐ Change	e 🔲 Addition
NAME			3.2 NAM	E					٠
STREET ADDRI.SS			3.3 STRE	ET ADDRESS	s				
CITY-ST-ZIP				-ST-ZIP					
TITLE		☐ DELETE	4.1 TITLE					Change	e
NAME			4. 2 NAM	E	· ·				,
STREET ADDRESS			4.3 STRE	ET ADDRESS	s				
CITY-ST-ZIP			4.4 CITY						
TITLE		☐ DELETE	5.1 TITLE					☐ Change	e
NAME			5 2 NAME		_[
STREET ADDRESS			1	ET ADDRESS	S				l
CITY-ST-ZIP			5.4 CITY			<u> </u>			
TITLE		DELETE	6.1 TITLE					Change	Addition
NAME			6.2 NAM						ļ
STREET ADDRESS			63 STRE	ET ADDRESS	S				ĺ

14. I heret y certify that the informa ion 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 supplied with all does not quality for the exemption stated if Section 1.19.07(5)(f). Fortidal statutes, indicated the 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 unider oath; that I am an officer or director of the corporation or the receiver or trustee/pmpowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes, or on an attact ment with all address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP