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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

POCUMENT # P93000079275 (2)

FILED Apr 24 1997 8:00am Secretary of State

LUCE F		ARKET, INC.		()							
Principal Plac	e of Busines	is	Mailing Addr	ess				6100 65 18 80			
630 BÉ MONTEREY ROAD STUART FL 34994 US			P.O. BOX 243	P.O. BOX 243 PALM CITY FL 34991-0243							
							3. Date Incorporated or Qualified 11/08/1993 3a. Date of Last Report 04/26/1996				
2. Principal P	lace of Busi	ness	2e. Mailing A	2e. Mailing Address			4. FEI Number		1 - 4-		oplied For
21			26				65-04477	736		No	ot Applicable
Suite, Apt. #, etc.			·	Suite, Apt #, etc.			5. Certificate of	Status Desired		\$8.75	
City & State			City & Ste	City & State						Fee Re	
23			F '	28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip				Zip Country			Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s. 199.032,				
24	25		<u> </u>	29 30		,		Florida Statutes Yes No			. 199.032,
	9. Name	and Address of Curr					10. Name and Address of New Registered Agent				
LUC	E, RANDAI	LL R			81	Name					
		erey road				Street Ac	ddress (P.O. Box Numb	per is Not Acceptat	ole)		
STU	IART FL 34	1994									
				\	83	'n					
					84	City	·			85 Zip (Code
11. Pursuan/to the provisions of Sections 607.0502 and 607.0505 florida Statu office of registered agent, or bold, in the State of Florida Such change was agent, a m familiar with, and scept the Aligation of Section 607.0505, Fl					on the abov	lo regued o	ornaration aubmits this	atotograd for the r	FL	abancine it	n vonistation
office or r	egistered ag m familjar w	gent, or bold, in the State in and accept the state	rie of Foriet Such of ligation of Section 6	nange was a 107.0505. Flo	es, the above authorized b orida Statute	y the corpo	orporation submits this reation's board of direct	tors. I hereby accep	orbose or of the appo	changing its pintment as	registered
SIGNATURE	10	-succi	\ \					<u> </u>	P-17	-97	
12,	Signature, typed	For printed name of registered a OFFLICERS A	agent and little if applicable AND DIRECTORS					HANGES TO OFFIC	DATE SERS AND	DIRECTOR	S INL 12
TITLE	P	OTT OLLTO?		DELETE	1.1 101.6	<i></i>	NDDITIONO(O	I MITGES TO SITTE		Change	Addition
NAME	RANDAL	L LUCE R.			1.2 NAME					_ *	_
STREET ADDRESS	2401 S.V	v. Valnera st.				1 ADDRESS					
CITY-ST-ZIP	PORT S1	T. LUCIE FL 34953			1.4 CITY -	\$1- <i>71</i> P					
TITLE				DELETE	2.1 THILE					Change	Addition
NAME				2.2							
STREET ADDRESS	STREET ADDRESS			2.3 5				•			
CITY-ST-ZIP					2. 4 CITY-	ST-ZIP					
TITLE			L	DELETE	3.1 1111.6				!	Change	Addition
NAME					3.2 NAME						
STREET ADDRESS						T ADDRESS					
CITY-ST-ZIP TITLE				DELETE	3.4. CITY- 4.1 TITLE	ST-7IP	774			Change	Addition
NAME			L			Ė			'	☐ Change	Addition
STREET ADDRESS					4. 2 NAME	T ADDRESS					
CITY-SY-ZIP					4.5 STREE	- 1					
TITLE				DELETE.	5.1 TITLE	31-21				Change	Addition
NAME					5.2 NAME						
STREET ADDRESS						1 ADORESS					
CITY-ST-ZIP					5.4 CITY-						
TITLE				DELETE	6.1 TITLE					Change	Addition
NAME					6.2 NAME						
CTREET ANABESS					6 2 STREE	T ADDDECC					

64 9IY-S1-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. Further certify that the information indicated on the annual report or displemental 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 cocyclation or the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 of Block 13 is changing, or open attachment with an address.