SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997

STREET ADDRESS

CITY-ST-ZIP



ELORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000083011 (5)

LEGAL ACTION WORKS INCORPORATED

Principal Place of Business Mailing Address 2240 WOOLBRIGHT_RO 2240 WOOLBBIGHT RD STE 308 DO NOT WRITE IN THIS SPACE BOYNTON &CH FL 33426 BOYNTON BCH FL 33426 3. Date Incorporated or Qualified 3a. Date of Last Report 12/06/1993 4. FEI Number 06/10/1996 2. Principal Place of Business 2a. Mailing Addrest Applied For 21 515 N. CLAGLIER 65-0474066 Not Applicable Suite, Apt. #, etc. Suite, Apt. # \$8.75 Additional 5. Certificate of Status Desired <u> 300</u> Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be WBST Trust Fund Contribution Added to Fees Zip Country 8. This corporation owes or has paid the current year Intangible (25 U.S. A. 29 9, Name and Address of Current Registered Agent Personal Property Tax due June 30. 30 Yes 10. Name and Address of New Registered Agent 81 Name WARREN, PATRICIA J 2240 WOOLBRIGHT RD 82 Street Address (P.O. Box Number is Not Acceptable) **STE 306** 83 **BOYNTON BCH FL 33426** 84 City 85 Zip Code 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 registered 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 tapilitar with, and accept the obligations of, Softion 607.0505, Florida Statutes. **SIGNATURE** Bog stored Agent signature required when reinstating) OFFICER AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TITLE Change ■ Addition Warren, Patricia J NAME 1.2 NAME 575 N. FLAGLER DRIVE #300 2240 WOOLBRIGHT RD-996 1.3 STREET ADDRESS STREET ADDRESS WEST PALLY BEACH, BOYNTON BOH FL-33401 CITY-ST-ZIP 1.4 CHY-S1-ZIP DELETE Change Addition TITLE 2.1 TITLE 500002301005-NAME 22 NAMI -09/23/97--01055--009 STREET ADDRESS 23 STREET ADDRESS ****550.80 ****550.00 CITY-ST-ZIP 2 4 CHY-ST-ZIP DELETE TITLE 31 THILE Change Addition NAME 3.2 NAME STREET ADDRESS **33 STHEFT ADDRESS** CITY-ST-ZIP 3 4. CITY- \$1-ZIP DELETE Addition . TITLE 4 1 1111 E ☐ Change NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-SI-ZIP TITLE DELETE 51 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5 3 STREET ADDRESS CITY-ST-ZIP 5 4 OffY - ST - ZIP DELETE ☐ Addition TITLE 61 TITLE NAME 6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - 7IP

14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the

APPROVED

1997 SEP 22 PH 2: 41 SECRETARY OF STATE TALLAHASSEE, FLORIDA



information indicated on this annual report of supplemental angular report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the projection of the project of graphs of the project of the proj