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

PROFIT CORPORATION ANNUAL REPORT

1998



## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000019988 (2)

LEWIS & CLARK OPERATING, INC.

Principal Place of Business Mailing Address

## **FILED** May 11 1998 8:00am Secretary of State



6300 NW 103RD ST. HIALEAH GARDENS FL 33166		P.O. BOX 2577 HIALEAH FL 33012		DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified	
				03/10/1994	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
21		26		NOT APPLICABLE	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27			Fee Required
Çity & State		City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	[28] Zip	Country	Trust Fund Contribution	Added to Fees
24	25		30	This corporation owes or has paid the curl Personal Property Tax due June 30.	Yes No
9. Name and Address of Current Registered Agent			301	10. Name and Address of New Registered	
DUNN, LOWELL \$ 81 Name					
	00 NW 103RD ST.		82 Street Ad	ddress (P.O. Box Number is Not Acceptable)	
	LEAH GARDENS FL 33166		oz Sireer Ad	doress (F.O. Box Number is Not Acceptable)	
B					
			84 City		85 Zip Code
			City	FL	210 COOR
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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE					
	Signature, typed or printed runnin of registere		Registered Agent signature red		
12.	OFFICERS D	AND DIRECTORS  DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AND	Change Addition
TITLE	DUNN, LOWELL S II	Detere	1.1 TITLE		Cualific C Vacation
NAME	8300 NW 103RD ST.		1.2 NAME		
STREET ADDRESS	HIALEAH GARDENS FL 3	2100	1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	TRALEAN GANDENS PL S	DELETE	1,4 CITY-ST-ZIP 2.1 TITLE		Change Addition
NAME			2.2 NAME		C cuttings C vocation
STREET ADORESS			2.3 STREET ADDRESS		
				•	
CITY-ST-ZIP TITLE		DELETE	2.4 CITY-ST-ZIP 3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 THTLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		ļ
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
	ertify that the information supplied	d with this filing does not qualify for		in Section 119.07(3)(i), Florida Statutes. I further ce	rtify 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 on an attachment with an address.