

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000029486 (5)

1. Corporation Name

LASH MANAGEMENT CORP.



Principal Place of Business

Mailing Address

2521 NW 63RD ST.
BOCA RATON FL 33496

2521 NW 63RD ST.
BOCA RATON FL 33496

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

3. Date Incorporated or Qualified
04/19/1994

3a. Date of Last Report
03/27/1995

4. FEI Number
65-0489627

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MIDVARSKY, ARNOLD
2521 NW 63RD ST
BOCA RATON FL 33496

81 Name MIDLARKSKY ARNOLD

82 Street Address (P.O. Box Number is Not Acceptable)
2521 N.W. 63RD STREET

83

84 City Boca Raton FL 85 Zip Code 33496

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

Arnold Midlarsky

ARNOLD MIDLARKSKY

3/2/96

(NOTE: Registered Agent signature required when resigning.)

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME MIDVARSKY, HELENE M. DLARKSKY, HELENE
STREET ADDRESS 2521 NW 63RD ST
CITY-ST-ZIP BOCA RATON FL ☒ DELETE

TITLE T
NAME MIDVARSKY, ARNOLD M. DLARKSKY, ARNOLD
STREET ADDRESS 2521 NW 63RD ST
CITY-ST-ZIP BOCA RATON FL ☒ DELETE

TITLE VP
NAME MIDVARSKY, STEVEN M. DLARKSKY, STEVEN
STREET ADDRESS 3148 NW 56TH ST
CITY-ST-ZIP BOCA RATON FL ☒ DELETE

TITLE S
NAME PORALES, LAVRON L DR
STREET ADDRESS 2870 WILDERNESS ROAD
CITY-ST-ZIP WEST PALM BEACH FL ☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRESIDENT ☒ Change ☐ Addition
1.2 NAME MIDLARKSKY HELENE
1.3 STREET ADDRESS 2521 N.W. 63RD STREET
1.4 CITY-ST-ZIP BOCA RATON FLORIDA 33496

2.1 TITLE TREASURER ☒ Change ☐ Addition
2.2 NAME MIDLARKSKY, ARNOLD
2.3 STREET ADDRESS 2521 N.W. 63RD STREET
2.4 CITY-ST-ZIP BOCA RATON FLORIDA 33496

3.1 TITLE V.P. ☒ Change ☐ Addition
3.2 NAME MIDLARKSKY, STEVEN
3.3 STREET ADDRESS 3148 N.W. 56TH STREET
3.4 CITY-ST-ZIP BOCA RATON FLORIDA 33496

4.1 TITLE SEC. ☒ Change ☐ Addition
4.2 NAME LI PORACE, LAUREN
4.3 STREET ADDRESS 7716 STEEPLE CHASE DRIVE
4.4 CITY-ST-ZIP PALM BEACH GARDENS FLORIDA 33418

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify 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.

SIGNATURE:

HELENE M. DLARKSKY Helene Midlarsky

DATE

3/2/96

CR2E034 (12/95)