

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

FILED  
May 15 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P94000030816 (0)

1. Corporation Name

LOWELL AT LAWRENCE, INC.



Principal Place of Business

Mailing Address

% S. LAWRENCE KAHN, III  
1451 SOUTH MIAMI AVE.  
MIAMI FL 33130

% S. LAWRENCE KAHN, III  
1451 SOUTH MIAMI AVE.  
MIAMI FL 33130-4316

3. Date Incorporated or Qualified

04/22/1994

3a. Date of Last Report

04/30/1996

2. Principal Place of Business

21 80TH SOUTH WEST 8TH ST  
Suite, Apt. #, etc.

2a. Mailing Address

26 80TH SOUTHWEST 8TH ST  
Suite, Apt. #, etc.

4. FEI Number

65-0493075

Applied For

Not Applicable

22 SUITE 1870

27 SUITE 1870

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

23 MIAMI FL

28 MIAMI FL

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

24 33130

Country

29 33130

Zip

Country

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

KAHN, S. LAWRENCE III  
1451 SOUTH MIAMI AVE.  
MIAMI FL 33130

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

80TH SOUTHWEST 8TH STREET

83

SUITE 1870

84

MIAMI

FL

85

Zip Code  
33130

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 of the corporation's registered agent and the applicable

(NOTE: Registered Agent signature required when reinstating)

4/30/97

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

D  
NAME  
KAHN, S. LAWRENCE III  
STREET ADDRESS  
1451 SOUTH MIAMI AVE.  
CITY-ST-ZIP  
MIAMI FL 33130

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

80TH SOUTHWEST 8TH ST - STE 1870

1.4 CITY-ST-ZIP

MIAMI, FL 33130

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

VST

HEARNE, ALAN

80TH SOUTHWEST 8TH STREET - STE 1870

MIAMI FL 33130

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change

☐ Addition

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change

☐ Addition

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change

☐ Addition

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

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 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/97 (305) 577-8550

Daytime Phone #

0169052

CR2E034 (9/96)