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

**PROFIT CORPORATION ANNUAL REPORT** 

**19**98



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 13 1998 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

	MENT # P9400 L AT LAWRENCE, INC.	0030816 (0	)			AN IIINI ANGAL KANAL INGIN GANG KANA
Principal Place of Business Mailing Address					<u> </u>	\$1       <b>11</b>
BOTH SW BTH ST SUITE 1870 MIAMI FL 33130		Mailing Address	·			
		80TH SW 8TH ST SUITE 1870			DO NOT WRITE IN THIS SPACE	
		MIAMI FL 33130				
US		US			3. Date Incorporated or Qualified	
					04/22/1994	
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For
Suite, Apt.	# etc	26	'		65-0493075	Not Applicable
22	#, GIC.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & Stat	.e	· — · · · • • · · • · · · · · · · · · ·	City & State		C Floation Compaign Financias	
23		28	<del></del>		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zιρ	Zip Country		8. This corporation owes or has paid the current year Intangible	
24	25	29	30		Personal Property Tax due June 30.  Yes No	
	9. Name and Address of Curre	ent Registered Agent		٦٠	10. Name and Address of New Registe	red Agent
	HN, S. LAWRENCE III		81	Name		
	TH SW 8TH ST		82	Street Add	fress (P.O. Box Number is Not Acceptable)	
	ITE 1870		83	<u>'</u>		
MI/	MIAMI FL 33130					
			84	City		85 Zip Code
A B						FL   S   Z   COGG
office or r agent. I a	to the provisions of Sections 607.0: registered agent, or both, in the Stat im familiar with, and accept the obli-	buz and 607, 1508, Florida Stat te of Florida. Such change wat gations of, Section 60 <mark>7,0505,</mark> I	lutes, the abov s authorized b Florida Statute	e-named con y the corpora s.	poration submits this statement for the purpo ation's board of directors. I hereby accept the	se of changing its registered appointment as registered
SIGNATURE						
12.	Signature, typed or prioted name of registered as OFFICERS At	gent and the if applicable (NI ND DIRECTORS	13.	ent signature requ	ADDITIONS/CHANGES TO OFFICERS	AND DIDECTORS IN 10
TITLE	DPS	DELETE	11 TITLE		ADDITIONS/CHANGES TO OFFICERS	Change Addition
NAME	KAHN, S. LAWRENCE III		1.2 NAME			C ontaining C procession
STREET ADDRESS	80TH SW 8TH ST SUITE 18	70	1.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL		1.4 CITY - S			
TITLE	<b>VST</b> DELETE		2.1 TITLE	<del></del>		Change Addition
NAME	HEARNE, ALAN		2.2 NAME			
STREET ADDRESS	80TH SW 8TH ST SUITE 187	70	2.3 STREET	ADDRESS		
CITY-ST-ZIP	MIAMI FL		2. 4 CITY-	ST-ZIP		
TITLE	☐ DELETE		3.1 TITLE		No. of the second secon	Change Addition
NAME			3.2 NAME			
STREET ADDRESS	RESS		3.3 STREET	ADDRESS		
CITY-ST-ZIP			34 CITY-	ST-ZIP		
TITLE	☐ DELETE		4 1 TITLE			Change Addition
NAME			4. 2 NAME			
STREET ADDRESS	S		4.3 STREET	ADDRESS		
CITY-ST-ZIP			4.4 C(TY - S	ST - ZIP		
TITLE	☐ DELETE		5.1 TITLE			Change Addition
NAME DEDCET ADDRESS			5.2 NAME			İ
STREET ADDRESS			5.3 STREET			
CITY-ST-ZIP TITLE	IP DELETE		5.4 CITY - S	51 - ZIP		Change Addition
		☐ nereig	6.1 TITLE			Change Addition
NAME Street address			6.2 NAME	ADDRESS		
CITY-ST-ZIP		6.3 STREET	i i			
OUT TO PART			6.4 CITY-S	11-ZIF		

14. Thereby 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.