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

PROFIT CORPORATION ANNUAL REPORT

1997

TITLE NAME

STREET ADDRESS

CITY - ST - ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P94000047245 (3)

L & J WAREHOUSING, INC.

Mailing Address Principal Place of Business **603 CENTRAL FLORIDA PKWY 803 CENTRAL FLORIDA PKWY** SUITE 105 SUITE 105 ORLANDO FL 32824-8563 ORLANDO FL 32824 3a. Date of Last Report 3. Date Incorporated or Qualified 06/20/1994 04/26/1996 2. Principa' Place of Business 2a. Mailing Address Applied For 59-3248092 Not Applicable 26 21 Suite, Apl. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country Zip Zip Country This corporation has liability for intangible tax under s. 199.032, Yes 🔲 No 30 Florida Statutes 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name MARLAR, ROBERT **603 CENTRAL FLORIDA PARKWAY** Street Address (P.O. Box Number is Not Acceptable) SUITE 105 83 ORLANDO FL 32824 City 84 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 familiar with and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or profud hame of registered agent and tide if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) 12. OFFICERS AND DIRECTORS 13. Addition DELETE Change 1.5 TITLE TOLE NAME MARLAR, LORRAINE C 1.2 NAME 603 CENTRAL FL. PKWY, SUITE 105 STREET ADDRESS 1.3 STREET ADDRESS ORLANDO FL CHY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.3 TRILE 2.2 NAME NAME * 1 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY-ST-ZIP City - St - 7IP DELETE ☐ Change Addition 3.1 TELLE TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADORESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY - ST - ZIP DELETE 5.1 TITLE Change ☐ Addition TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY - ST- ZIP

DELETE

6.1 TITLE

62 NAME 63 STREET ADDRESS

64 CITY-ST-ZIP

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 18 if changed, or on an attachment with an address. Baskarie C. Marlar C. Librative C. MARLAK
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DRIEGTOR

FILED

Feb 13 1997 8:00am

Secretary of State

___ Addition