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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

AENT # DOACOOA

DOCUMENT # P94000047961 (5)
1. Corporation Name

LAKER CAFE, INC.

Principal Place of Business	Maiting Address			
4710 LAND O' LAKES BLVD SUITE 11	4710 LAND O' LAKES SUITE 11			
LAND O' LAKES FL 34639	LAND O' LAKES FL 34	4639	3. Date incorporated or Qualified 06/22/1994	3a. Date of Last Report 08/23/1995
2. Principal Place of Business	2a. Ma'ling Address	4411	4. FEI Number	Applied For
21	26		59-3249135	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23	28		Trust Fund Contribution  8. This corporation has liability for	Auded to Leas
Zip Country	Zip	Country 30		No
24 25 25 9. Name and Address of Cu	29 29 Agent	[30]	10. Name and Address of New F	
TURGO; SALLY A 4710 LAND O' LAKES BLVD SUITE 11 LAND O' LAKES FL 34639		83	Hy Habe I dress (P.O. Box Number is Not Acceptab	85 Zin Code
11. Pursuant to the provisions of Sections 607.0		<b>84</b> City		FL
familiar with and a find the obligations of	Section 602,0505, Florida Statute	S.	ard of directors. I hereby accept the app	5-15-96
SIGNATURE Y SIGNATURE STRUCK PROJECT CAMPACT REGISTERED	all Setty	/-/ABEL ICTE Registered Agent signature requi		CATE FICERS AND DIRECTORS IN 12
SIGNATURE X Signature operation page of comment registered	agent and title it applicated. N	<i>一月内島とし</i> IOTE - Registered Agent signature requi		DATE
SIGNATURE: Signal of April of Department registered  12. OFFICERS	agent and title it applicated in N	IOTE Registered Agent signature requi		CATE FICERS AND DIRECTORS IN 12
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SIGNATURE: State of the control registered  12. OFFICERS  TITLE P  NAME HABEL, BETTY  4710 LAND O'LAKES BLY  LAND O'LAKES FL 34638  TITLE V	agond and title if appropriate  6 AND DIRECTORS  DELETE  VD. STE. 11	COTE - Fleg stored Alpreit signature resoul  13.  1. 1 TILE  12 NAME  1.3 STREET ADDRESS  1.4 CITY - ST - ZIP	ADDITIONS/CHANGES TO OFF	CATE FICERS AND DIRECTORS IN 12
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SIGNATURE: Signature of the body community registered.  12. OFFICERS  TITLE P HABEL, BETTY  4710 LAND O'LAKES BLY LAND O'LAKES FL 34639  TITLE V HABEL, HABEL W.  STREET ADDRESS 4710 LAND O'LAKES BLY LAND D'LAKES BLY LAND D'LAKES BLY LAND D'LAND O'LAKES BLY LAND D'LAKES BLY LAND D'LAKES BLY LAND D'LAND D'LAKES BLY LAND D'LAND D'LAKES BLY LAND D'LAND D'LAKES BLY LAND D'LAND D'LAKES BLY LAND D'LAN	Append and this it appropriate  S AND DIRECTORS  DELETE  VD. STE. 11  DELETE  VD. STE. 11	TABLE  13.  1. 1 Title  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY - ST - ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS	ADDITIONS/CHANGES TO OFF	CATE -ICERS AND DIRECTORS IN 12
SIGNATURE: Signature Shield By Common registered  12. OFFICERS  TITLE P  NAME HABEL, BETTY  4710 LAND O'LAKES BLV  LAND O'LAKES FL 34639  TITLE V  NAME HABEL, HABEL W.  SIREET ADDRESS  CITY-ST-ZIP LAND O'LAKES BLV  LAND O'LAKES FL 34639  LAND O'LAKES FL 34639	Append and this it appropriate  S AND DIRECTORS  DELETE  VD. STE. 11  DELETE  VD. STE. 11	13.  1. 1 Title  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY - ST - ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY - ST - ZIP	ADDITIONS/CHANGES TO OFF	CATE  CERS AND DIRECTORS IN 12  Change Addition  Change Addition
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