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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B Mortham

Secretary of State DIVISION OF CORPORATIONS

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DOCUMENT # P9400060238 (0) 1. Corporation Name									
•	LS ROAD BUILDING INVI	ESTORS, INC.							
Principal Place of Business Mailing Address					TOOK HADE THE CONTROL WITH COME OF THE CONTROL OF T				
601 RIVER	SIDE AVE	601 R	IVERSIDE AVE						
BLDG 2 ST	TE 650 Ville F 32204		2 STE 650 Sonville FL 32204	1					
US	VILLE I SELVY	US	OHINGE IE GEE	•		3. Date Incorporated or Qualifi 08/16/1994	ed 3a .	Date of Last R 06/15/*	•
Principal Pla	ace of Business	2a. Mailing	Address			4. FEI Number			Applied For
		26				59-3261855			Not Applicable
Suite, Apt. #	#, etc	<u> </u>	Apt. #, etc.			5. Certificate of Status Desired		•	Additional Required
City & State)	27 City & 5	Stale			6. Election Campaign Financin	q .		May Be
,		28				Trust Fund Contribution			d to Fees
Zıpı	Country	Zip		Country		8. This corporation has liability			199.032,
	25 25 25 25 25 25 25 25 25 25 25 25 25 2	29 rrent Registered A	gent 30	ــــــــــــــــــــــــــــــــــــــ		Florida Statutes	Yes 🔲		
	5. (talle Blu Address of Out	Total Hogistorea F	go	81	Name	, , , , , , , , , , , , , , , , , , , ,			
SHAW	V, R LAMAR JR			82	Street Ado	Iress (P.O. Box Number is Not Acce	ntable)		
	RIVERSIDE ACE			62	Street Asc	11633 (1 .0. Dox 11011100113 110171000	pidibioj		
	2 STE 650			83					
JACK:	SONVILLE FL 32204			84	City			85 Z	ıp Code
- · <u>·</u> - · - · · · · ·			=			ration submits this statement for the		FL "	
or register familiar wit	red agent, or both, in the State of f th, and accept the obligations of, \$	Florida, Such change Section 607 0505, Fl	e was authorized by loride Statutes	y the corp	oration's boa	ard of directors. I hereby accept the	appointm	ent as registered	d agent. I am
GNATURE			orga Statutes.						
GNATURE	Styliature, by set or printed ranno of regularization OFFECERS	agent and little if applicable		agistered Agen		ad when reinstating)	c	DATE	
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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:

Ralph Lamar Shaw, Jr. 1/17/96 904-358-0900
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Date

Date

Descript Phone F