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

PROFIT **CORPORATION ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

FILED

Apr 30 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

CITY-ST-ZIP

DOCUMENT # P94000067268 (0)

THIRTY-SIX LAGORCE, INC.

Principal Place of Business Mailing Address 36 LAGORCE CIRCLE 36 LAGORCE CIRCLE 201 SQ. BISCAYNE BLVD. STE. 3000 201 SO. BISCAYNE BLVD. STE. 3000 MIAMI BEACH FL 33140 MIAMI BEACH FL 33141-4520 3. Date Incorporated or Qualified 3a. Date of Last Report 09/13/1994 03/22/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0518887 21 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Country Ζip Country 8. This corporation has liability for intangible tax under s 199.032, Yes 24 25 29 30 Florida Statutes 10. Name and Address of New Registered Agent 9, Name and Address of Current Registered Agent 81 Name B & C CORPORATE SERVICES, INC. C/O DAVID J. BERGER ESQ. 82 Street Address (P.O. Box Number is Not Acceptable) 201 \$0. BISCAYNE BLVD. STE. 3000 83 **MIAMI FL 33131** 84 City 85 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 printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)12 OFFICERS AND DIRECTORS 13. DELETE ESIDEM Change TITLE 1.1 TITLE HAHN, LOTHAR NAME 1.2 NAME **36 LAGORCE CIRCLE** STREET ADDRESS 13 STREET ADDRESS MIAMI BEACH FL CITY-ST-ZIP 1.4 DiTY-S1-ZIP 🔀 DELETÉ Change Addition TITLE 2.1 THE JAMES, RICHARD ALAN NAME 2.2 NAME 36 LAGORCE CIRCLE STREET ADDRESS 2.3 STREET ADDRESS MIAMI BEACH FL CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE TITLE Change Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-S1-ZIP DEFETE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET AODRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

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 changes, or dispinal attachment with an address.

6.4 CITY - ST - ZIP