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PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000012748 (6)

1. Corporation Name

LANGIC 9000 INVESTMENT CORP.



Principal Place of Business

Mailing Address

2500 PARKVIEW DRIVE  
UNIT 1115  
HALLANDALE FL 33009

2500 PARKVIEW DRIVE  
UNIT 1115  
HALLANDALE FL 33009

3. Date Incorporated or Qualified

02/15/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 2618 N.W. 72 AVE.

26 2618 N.W. 72 AVE.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 MIAMI FL.

28 MIAMI FL.

24 Zip

25 Country

29 Zip

30 Country

33122

DADE

33122

DADE

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KEYS, CAROL F  
12700 BISACAYNE BLVD.  
SUITE 203  
NORTH MIAMI FL 33181

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

2618 N.W. 72 AVE

83

84 City MIAMI

FL

85 Zip Code 33122

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 re-stating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D  
NAME SERRUYA, MARIO  
STREET ADDRESS 2500 PARKVIEW DR. UNIT 1115  
CITY-ST-ZIP HALLANDALE FL 33009

1.1 TITLE RAS  
12 NAME SERRUYA, MARIO  
13 STREET ADDRESS 2618 N.W. 72 AVE.  
14 CITY-ST-ZIP MIAMI FL 33122

TITLE D  
NAME AHARONOV, BENJAMIN  
STREET ADDRESS 2500 PARKVIEW DR. UNIT 1115  
CITY-ST-ZIP HALLANDALE FL 33009

2.1 TITLE T.  
22 NAME AMSELEM, ALEX  
23 STREET ADDRESS 2618 N.W. 72 AVE  
24 CITY-ST-ZIP MIAMI FL 33122

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

3.1 TITLE  
32 NAME  
33 STREET ADDRESS  
34 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE  
42 NAME  
43 STREET ADDRESS  
44 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE  
52 NAME  
53 STREET ADDRESS  
54 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE  
62 NAME  
63 STREET ADDRESS  
64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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, unchanged, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARIO SERRUYA  
PRESIDENT

(305) 470-7217

Date

Daytime Phone #

CR2E034 (12/95)