SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # P95000014984 (5)

L.J. LUKRAFKA, INC.

SIGNATURE:

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Daytime Phone #

Principal Place	of Business	Mailing A	ddress			!************************************				
1126 33RD AVENUE SW 1126 33RD AVENUE SW										
VERO BEACH		VERO BE	VERO BEACH FL 32968				Date Incorporated or Qualified O2/21/1995 Sa. Date of Last Report			
2. Principal Pl	ace of Business	2a. Mailin	2a. Mailing Address				4. FEI Number Appl			ed For
1		26					65-0560864	Not Applicable \$8.75 Additional		
Suite, Apt a	#, etc	h	Suite, Apt. #, etc.				6. Certificate of Status Desired		Fee Requir	
2 City & State			City & State				6. Election Campaign Financing \$5.00 May Be			
3		28					Trust Fund Contribution	L_J Added to Fees		
Zιρ	Country	Zip	Zip		Country		8. This corporation has liability for intengible tax under s. 199.032			1.032,
4	9. Name and Address of Cui	29		30			Fiorida Statutes Yes No 10. Name and Address of New Registered Agent			
		Tent Registered A	(Dott		81	Name	7.			• • • • • • • • • • • • • • • • • • • •
	Krafka, luke j 26 33RD avenue SW				82	Street Add	ress (P.O. Box Number is Not Acceptab	e)	J. W. 1111	
	RO BEACH FL 32968					Onouchida	(10.00)			
VCI	U DENOTI LE SESOO				83					
					84	City	······································	 1	85 Zip Cod	e
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 Persuant office or n 	to the provisions of Sections 607. egistered agent, or both, in the St	0502 and 607.1508 late of Florida. Sucl	3, Florida Stati h change was	utes, the an authorized	ove Lby I	-named corp the corporati	oration submits this statement for the pu ion's board of directors. I hereby accept	the appoin	mont as regis	tered
agent I a	m lamiliar with, and accept the ot	oligations of, Section	on 607.0505, F	torida State	utes.					
SIGNATURE	Signature, typed or printed name of registerer	d as all and title if anninal	hle (N	OTF: Begistere	d Acie	nt signature requi	red when reinstating)	DATE		
12.		AND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTORS IN	
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NAME	LUKRAFKA, LUKE J			1.21			÷			
STREET ADDRESS	1126 33RD AVENUE SW			1.3 \$	TREET	ADDRESS				_
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NAME STREET ADDRESS						1 ADDRESS				
CITY \$1.2IP				6.40	HTY - S	ST-ZIP				
	by certify that the information sur	oplied with this filing	Lis voluntarily	1		d	affy for the exemption stated in Section	119,07(3)(k	, Florida Statu same legal eff	ites. I ect as if
turther ce made un	ertify that the information indicate ider oath, that I am an officer or d	o on this annual religion of the corpo	ration or the re	ecelver en	1061	pe empower	and accurate and that my signature shiped to execute this report as required by	Chapter 61	, Florida Statu	itos; and
that my r	name appears in Block 12 or Block	k 1311 changed, or	on anattachn	nent with ar	ads	oreas.				
		W///	/////	واستنارا راسم	1	1 A	8-27-06	1-800	-210-4	1627