DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

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

PROFIT **CÓRPORATION** ANNUAL REPORT

1999



Katherine Harris Secretary of State DIVISION OF CORPORATIONS

FLORIDA DEPARTMENT OF STATE

| DOCUMENT # 1. Corporation Name : | P950000 | 16779 |
|-----------------------------------|---------|-------|
| | 10.00 | • |

LPA INTERNATIONAL, INC.

| Principal Place of Business | Mailing Address | |
|--|--|--|
| 100 SE 2ND ST. 28TH FLOOR MIAMI FL 33131 | 100 SE 2ND ST. 28TH FLOOR MIAMI FL 33131 | |
| - 3 | | |
| 2. Principal Place of Business | 2a. Mailing Address | |
| 21 | 26 | |

| • | ** | | | | 1 027 | 28/1995 | |
|--------------------|------------------------|----------------------|------------|-----------|----------|--|--------------------------------|
| Principal Place o | f Business | 2a. Mailing A | ddress | | 4. FEI | Number | Applied For |
| | | 26 | | | 65- | 0580302 | Not Applicable |
| Suite, Apt. #, etc | | Suite, Ap | t. #, etc. | | | tifcate of Status Desired | \$8.75 Additional Tee Required |
| 'City & State :: * | All the same | City & St | ate . | n erfunks | | ction Campaign Financing | \$5.00 May Be Added to Fees |
| Zip | Country 25 | Zip 29 | 30 | ountry | I | s corporation owes the current year I sonal Property Tax. | ntangible Yes |
| 9, | Name and Address of Cu | rrent Registered Age | nt | | 10. Nar | ne and Address of New Registere | d Agent V |
| | | | | 81 Name | | | • |

KTG&S REGISTERED AGENT CORP Street Address (P.O. Box Number is Not Acceptable) 82 100 SE 2ND ST. 28TH FLOOR 83 **MIAMI FL 33131** 84 City

| | | -{ | |
|---|------|------|---|
| Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the at office or registered agent, or both, in the State of Florida. Such change was authorized | by | y ti | the corporation's board of directors. I hereby accept the appointment as registered |
| agent Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statu | ıtes | 15. | |

| SIGNATURE | NOTE | Occupand Assot alamahya mayir | ad urban exinctation) | DATE | } | | |
|----------------|--|-------------------------------|-----------------------|-------------|---------------|--|--|
| | Signature, types of planted fairing of registrated agents and user approaches. | | | | | | |
| 12. | OFFICERS AND DIRECTORS | 13 | ADDITIONS/CHANGES TO | Change | Addition | | |
| TITLE | PD DELETE | 1.1 TITLE | | □ Cliange | | | |
| NAME | PELLOUX, PHILLIPPE | 1.2 NAME | | | Ì | | |
| STREET ADDRESS | 1321 ALTON RD. | 1.3 STREET ADDRESS | | |] | | |
| CiTY-ST-ZIP | MIAMI BCH: FL | 1.4 CITY-ST-ZIP | | | | | |
| TITLE | DS DELETE | 2.1 TITLE | | Change | Addition | | |
| NAME | PAUL, NICHOLAS | 2.2 NAME | | | ł | | |
| STREET ADDRESS | 1321 ALTON RD. | 2.3 STREET ADDRESS | | | | | |
| CITY-ST-ZIP | MIAMI BEACH FL | 2.4 CITY-ST-ZIP | | | | | |
| TITLE | DT DELETE | 3 TITLE | a compa | Change | ☐ Addition | | |
| NAME | SIMON, LUTHER | : 3.2 NAME | | | } | | |
| STREET ADDRESS | 1321 ALTON RD. | 3.3 STREET ADDRESS | | | 1 | | |
| CITY-ST-ZIP | MIAMI BEACH FL | 3.4. CITY-ST-ZIP | | <u> </u> | i | | |
| TITLE | ☐ DELETE | 4.1 TITLE | | Change | ☐ Addition | | |
| NAME | · | 4. 2 NAME | | • | ì | | |
| STREET ADDRESS | | 4.3 STREET ADDRESS | | | | | |
| CITY-ST-ZIP | | 4.4 CITY-ST-ZIP | | | | | |
| TITLE | DELETE | 5.1 TITLE | | Change | ☐ Addition | | |
| NAME | , . * | 5.2 NAME | | ₹ | Í | | |
| STREET ADDRESS | | 5.3 STREET ADDRESS | | | { | | |
| CITY-ST-ZIP | | 5.4 CITY+ST-ZIP | | ······ | | | |
| TITLE | DELETE | 6.1 TITLE | | Change | Addition | | |
| NAME | • , | 6.2 NAME | | | [| | |
| STREET ADDRESS | | 6.3 STREET ADDRESS | | | } | | |
| CITY-ST-ZIP | | 6.4 CITY-ST-ZIP | • | | | | |

SIGNATURE:



85 Zip Code

I 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 13 if changed, or on an attachment with an address, with all other like empowered.