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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P95000023963 (8)

L R MARKETING, CORP

## FILED Jan 28 1997 8:00am Secretary of State



Principal Place of Business 4045 S.W. 138TH AVENUE MIAMI FL 33175		Mailing Address 4045 S.W. 138TH AYENUE MIAMI FL 33175-6461		1 10011201 INC 70101 9111 9011 9011 2011 2011 2011 2011			
					3. Date incorporated or Qualified 03/24/1995	3a. Date of Las 04/18/199	t Report
	lace of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26			65-0566634		Not Applicable
Suite Apt. 22	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	1 1 '	5 Additional Required
City & State	0	City & State	, <del>, , , , , , , , , , , , , , , , , , </del>	,	6. Election Campaign Financing	\$5.0	00 May Be
23		28			Trust Fund Contribution		ed to Fees
Z <sub>I</sub> p	Country	Zip	Coun	ry	8. This corporation has liability for i	ntangible tax unde	er s. 199.032,
24	25	29	30	~~~~		Yes No	
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Re	gistered Agent	
DE	LEON, MANUEL RUBEN		8	11 Name			
404	5 S.W. 138TH AVENUE		<u> </u>	2 Street Add	Iress (P.O. Box Number is Not Acceptab	le)	
MIA	MI FL 33175		"	52 Street Address (F.O. BOX Number is Not Acceptable)			
			8	3			
			ļ. <u>.</u> .				
			8	4 City		FL 85 2	ip Code
11. Pursuant	to the provisions of Sections 607 050	2 and 607 1508. Florida Sta	tutes the abo	ve-named cor	poration submits this statement for the p	urpose of observing	o its registered
office or r	egistered agent, or both, in the State	of Florida. Such change w	as authorized	by the corpora	ation's board of directors. I hereby accept	t the appointment	as registered
ageni i a	ini tam ilar water and accept the obliga	ations of, Section 607.0505,	, Florida Statu	.es.	01/2	0/97	
SIGNATURE	Lufullu	int an integrit applicable (I	MOTE Projectored	land sinner in roc	ired when reinstating)	DATE	
12.	OFFICERS AN	. A:	13.	Again signature resp	ADDITIONS/CHANGES TO OFFIC		ORS IN 12
TITLE	PS OF TOUR AND	DELETE	1.1 TITL	<u> </u>	ADDITIONS/OTTAINED TO OTTE	Chan	
	DE LEON, MANUEL RUBEN		1	ì		C. C.	go Land House
NAME	4045 S.W. 138TH AVENUE		1.2 NAM				
STREET ADDRESS	MIAMI FL 33175			ET ADDRESS			
C-1 1 - ST - ZIP	MICMITE COTTO	Driete		-ST-ZIP		T 1 0h	an Cardona
TI7LE		☐ DELETE	2.1 TITL			L. Chen	ge Addition
NAME			2.2 NAM	IE	۴ ,		
STHEET ADDRESS			2.3 STRI	EET AODRESS	·		
Cribi-ST ZIP			2. 4 CIT	7-S1-ZIP		·····	
TI"LF		☐ DELETE	3.1 TITL	E		Chan	ge 🔲 Addition
NAME			3.2 NAN	IE			
STREET ADDRESS			3.3 STR	EET ADDRESS			
C "Y - ST - ZiP			3.4. CIT	Y-ST-ZIP			
tilité		DELETE	4.1 TITL			☐ Chan	ge Addition
NAME			4. 2 NA	ME [			
STREET ADDRESS			4.3 STR	EET ADDRESS			
C Tr ST ZIP				-ST-ZIP			
7-Tif		☐ DELETE	5.1 TiTL			☐ Chan	ge Addition
NAME:			5.2 NAN				
STHEET ADDRESS			•	EET ADDRESS			
CITY - ST - ZIP				-ST-ZIP			
Tifles		☐ DELETE	6.1 TITE			Chan	ge Addition
		ריי מיננונ		·			9
NAVÉ			6.2 NAA				
SIREET ADDRESS				EET ADDRESS			
CITY - ST - ZIP			6.4 CIT	r-ST-ZIP			

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 13 if changed, or on an attachment with an address.

SIGNATURE:

NATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/20/97

305-417-2500

Daytime Phone #