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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000028060 (8)

LANA CORPORATION

## **FILED** Jan 14 1997 8:00am Secretary of State



Principal Place of Business			Mailing Address				4 SOUITED TIN DOUGH DITTLE BEILL BRITT BOTTO BILL BEILL			
C/O ELAINE BEUTEL 7533 HISPANOLA AVENUE NORTH BAY VILLAGE FL 33141		75	C/O ELAINE BEUTEL 7533 HISPANOLA AVENUE NORTH BAY VILLAGE FL 33141-4119							
HORITI DAT VI	ELIGE TE SOLAT						3. Date Incorporated or Qualified 04/06/1995		ate of Last R <b>27/1996</b>	leport
2. Principal P	ace of Business	28	. Mailing Address				4. FEI Number		<del>                                     </del>	oplied For
21			26				65-0572818	Not Applicable		
Suite, Apt.	#. etc	ļ <sub>1</sub>	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional
City & State	0	27	City & State							equired
23			28				6. Election Campaign Financing Trust Fund Contribution	П	•	May Be to Fees
Zip	Country		Zip	Cor	intry		B. This corporation has liability for		<del></del>	
24	25	29		30				Yes 1		. 105.001.,
	9. Name and Address of Curre		stered Agent	1001	Γ		10. Name and Address of New Re			
BEU	ITEL, ELAINE				81	Name				
	3 HISPANOLA AVENUE				82	Stroot A	ddress (P.O. Box Number is Not Acceptal	ato)		
NORTH BAY VILLAGE FL 33141					02	Sileel Ai	ddress (F.O. Box Number is Not Acceptal	ж		
1101					83				, , , , , , , , , , , , , , , , , , , ,	
					84	City			les Zio	Code
					"	City		FL	85 Zip	Cone
office of r agent 1 a SIGNATURE	egistered agent, or both, in the Statim familiar with, and accept the oblination of the state of	igations c	of, Section 607.0505, f	Florida Sta	tutes	S.	oration's board of directors. I hereby acce	pt the app	oomment as	registered
12.	OFFICERS A			13.	_	ark signature n	ADDITIONS/CHANGES TO OFFI		D DIRECTO	RS IN 12
TITLE	PD	1462 2-1716	DELETE	1.1 T		T	7,001110110,011111020 10 0111	<u>OLIIO 7111</u>	Change	Addition
NAME	BEUTEL, ELAINE		<del>_</del>		AME				•	
STREET ADDRESS	7533 HISPANOLA AVENUE					ADDRESS				
CHY-S1-ZIP	NORTH BAY VILLAGE FL 33	141		- 1		ST-ZIP				
TITLE			DELETE	211					Change	Addition
NAME				22 N	IAME					
STREET ADDRESS				238	TREET	ADDRESS		<b>y</b> +		
CITY - ST - ZIP				2 4 (	CITY-:	SI-ZIP		•		
TITLE			DELETE	3.1 T	ITLE				☐ Change	Addition
NAME				3.2 N	IAME	]				
STREET ADDRESS				3.3 \$	TREET	r address				
CITY - SY - ZIP				3.4. 0	CITY-	ST-ZIP				
TITLE			☐ DELETE	4.1 1	ITLE				Change Change	Addition
NAME				4.21	NAME					
STREET ADDRESS				4.3 \$	TREET	T ADDRESS				
CITY-ST-ZIP						ST - 2(P			·	
TITLE			☐ DELETE	5.1 T					Change	Addition
NAME				5.2 N	IAME					
STREET ADDRESS				5.3 \$	TREET	f address				
CITY-S1-ZIP			no ere			ST-ZIP			T 20	
TITLE			DELETE	617					Change	☐ Addition
NAME					IAME					
STREET ADDRESS				6.3.\$	TREET	ADDRESS				
CITY-ST-ZIP				640	) <u>  YTI</u>	ST-ZIP				

14. I do hereby certify that the information supplied with this filling 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 13 if changed, or on an attachment with an address.

JAN 6, 1897 (305) 866-2210