

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra H. Morahan
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P95000040157 (6)**

1. Corporation Name
LA PIAZZA INC.



Principal Place of Business

**155 LINCOLN ROAD
MIAMI BEACH FL 33139**

Mailing Address

**155 LINCOLN ROAD
MIAMI BEACH FL 33139**

2. Principal Place of Business

2a. Mailing Address

21. State, Apt. #, etc.

26. State, Apt. #, etc.

22. City & State

27. City & State

23. Zip Country

28. Zip Country

24. 25.

29. 30.

9. Name and Address of Current Registered Agent

**LAZAR, BRUCE E
1111 LINCOLN ROAD
SUITE 500
MIAMI BEACH FL 33139**

3. Date Incorporated or Qualified **05/22/1995**

3a. Date of Last Report

4. FEI Number **65-0591452**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City **FL** 85. Zip Code

11. Pursuant to the provisions of Sections 607.08(2) 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 607.08(5), Florida Statutes.

SIGNATURE

Signature of the person who is authorized to execute this statement on behalf of the corporation

Signature of the person who is authorized to execute this statement on behalf of the corporation

(Date)

12. OFFICERS AND DIRECTORS

1. Title ☐ DELETE
NAME **PD**
Street Address **Lowenstein, Alfredo**
City & State **155 Lincoln Road, Miami Beach, Fl.**
2. Title ☐ DELETE
NAME **S**
Street Address **Campbell, Isabelle**
City & State **155 Lincoln Road**
City & State **Miami Beach, Fl.**
3. Title ☐ DELETE
NAME **VD**
Street Address **Cooney, John W.**
City & State **169 Lincoln Rd. #318**
City & State **Miami Beach, Fl.**
4. Title ☐ DELETE
NAME **SD**
Street Address **Lazar, Bruce E.**
City & State **1111 Lincoln Road Mall, Ste. 500**
City & State **Miami Beach, Fl.**
5. Title ☐ DELETE
NAME
Street Address
City & State
6. Title ☐ DELETE
NAME
Street Address
City & State

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. Title ☐ Change ☐ Addition
2. NAME
3. STREET ADDRESS
4. CITY-STATE-ZIP
5. Title ☐ Change ☐ Addition
6. NAME
7. STREET ADDRESS
8. CITY-STATE-ZIP
9. Title ☐ Change ☐ Addition
10. NAME
11. STREET ADDRESS
12. CITY-STATE-ZIP
13. Title ☐ Change ☐ Addition
14. NAME
15. STREET ADDRESS
16. CITY-STATE-ZIP
17. Title ☐ Change ☐ Addition
18. NAME
19. STREET ADDRESS
20. CITY-STATE-ZIP

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.04(3)(g), Florida Statutes. I further certify that the information included 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. 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 Book 12 or Book 13, changed, or on an affidavit with an address.

SIGNATURE: *Isabelle P. Campbell*
Isabelle P. Campbell

Jan. 18, 1996 (305) 538-0811

CR2E034 (12/95)