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PROFIT *CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # **P95000088426**1. Corporation Name

LORVLIN, INC.

FILED Feb 08, 1999 8:00am **Secretary of State**

02-08-1999 90068 006 ***150.00



Principal Plac	ce of Business	Mailing Addres	s						
850 NORTH STATE ROAD 7			850 NORTH STATE ROAD 7				*		
PLANTATION I	FL 33317	PLANTATION FL	. 33317			00	NOT WRITE IN TI	LIC CDACE	
								113 SPACE	
•	•					3. Date Incorporated or	Qualifed	•	
	N	O- 14-02- A-4-	1			11/17/1995		1 1 4	
2. Principal i	Place of Business	2a. Mailing Add	iress		•	4. FEI Number	-		plied For
21		26				65-0626794	•		t Applicable
Suite, Apt	. #, etc.	Suite, Apt. #	4, etc.			5. Certifcate of Status I	Desired 📋	\$8.75 A	
22		27							
City & Sta	te ·	. City & State	9			6. Election Campaign F	- 11	\$5.00	
23	Country	28				Trust Fund Contribut		Added t	o:tees
Zip	Country	Zip		ountry		8. This corporation owe	, -		
24	25	29	30			Personal Property Ta		☐ Yes	□No
•••	9. Name and Address of Co	urrent Registered Agent		81	Name	10. Name and Address	of New Register	ea Agent	
VICI	KIE GOLDSTEIN	e Charles - Paris e Carlet		*'	Name				
				82	Street Add	Iress (P.O. Box Number is N	ot Acceptable)		
850 N SR 7						LANGE TO ME TO SERVICE AND A S	** *		
PLA	NTATION FL 33317			83					
	•			84	City	1 (2) (2) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	्रिक्ष व विद्यास्त्र के के के किया है। जान कर प्राप्त के के किया के किया किया	85 Zip (Code 10 10 1
				0~	City		· F	EL °° 2'°`	3006
11. Pursuant	to the provisions of Sections 607	7.0502 and 607.1508, Flor	rida Statutes, the	above	-named corp	poration submits this stateme	ent for the purpose	of changing its	registered
office or	registered agent, or both, in the Sam familiar with, and accept the o	State of Florida: Such char Ibligations of Section 607	nge was authoriz 0505, Florida St	zed by t tatutes	he corporati	ion's board of directors. I her	reby accept the ap	pointment as re	gistered
agonare		onganono or, coonon cor	.0000, 1 .0.1.22 01						
CLOSESTURE									
SIGNATURE	Signature, typed or printed name of registers	ed agent and title if applicable.	(NOTE: Register	red Agent	signature require	ed when reinstating)	DATE		-
SIGNATURE 12.	Signature, typed or printed name of registers	ed agent and title if applicable. S AND DIRECTORS	(NOTE: Register		signature require	ed when reinstating) ADDITIONS/CHANGE		AND DIRECTO	RS IN 12
	Signature, typed or printed name of registers	S AND DIRECTORS	1;		signature require	ADDITIONS/CHANGE		AND DIRECTO	RS IN 12
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14. I hereby certify that the information jupilied 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 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 supplied 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 of the pecific 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 of the pecific 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 of the pecific 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 of the pecific 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 of the pecific 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 of the pecific 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 of the pecific 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 of the pecific 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 of the pecific report is true and accurate and the pecific report of the pec

SIGNATURE: