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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000091346

1. Corporation Name

FILED Apr 02, 1999 8:00 am Secretary of State 04-02-1999 90018 029 ***150.00

LORDON	NINC.						
Principal Place	e of Business	Mailing Address) (MRIIAN) 150 INTEL BILLI PALIT ANDIEL	88111 98113 1818) IIS 60 I I	iis Giasa Aili saal
113 LANDINGS		113 LANDINGS BLVD.					
WEST PALM BEACH FL 33413 WEST PALM BEACH FL 33413					DO NOT WRITE	IN THIS SPACE	
					3. Date Incorporated or Qualifed	III IIIQ OF AGE	
					12/01/1995		
2. Principal Place of Business 2a. Mailing Address					4. FEI Number		Applied For
	lace of Business	26 Walling Address			65-0627985	 	Not Applicable
Suite, Apt.	# etc	Suite, Apt. #, etc.				\$8.75	Additional
22	, 60.	27			5. Certifcate of Status Desired	. 1	Required
City & Stat	e	City & State	<u>جانب کست بات ہ</u>		6. Election Campaign Financing	\$5.0	May Be
23	•	28			Trust Fund Contribution		d to Fees
Zip	Country	Zip	Cou	ıntry	8. This corporation owes the current	t year Intangible	
24	25	29	30		Personal Property Tax.	Yes	[A No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Reg	istered Agent	<u>'</u>
				81 Name	1		
PAGAN, DONALD				82 Street Ac	ddress (P.O. Box Number is Not Acceptable	e)	
113 LANDINGS BLVD							
WP	ALM BCH FL 33413			83	•		
	•			84 City	· · · · · · · · · · · · · · · · · · ·	85 Zi	Code
					orporation submits this statement for the pu ation's board of directors. I hereby accept t	FL	
12.	Signature, typed or printed name of registered agen OFFICERS AN	<u> </u>	TE: Registered		uired when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE CERS AND DIREC	TORS IN 12
TITLE	PD	☐ DELETE	1.1 TI	TLE		☐ Chang	e 🔲 Addition
NAME	PAGAN, DONALD		1.2 N/	AME	•		
STREET ADORESS	113 LANDINGS BLVD.		1.3 8	TREET ADDRESS			
CITY-ST-ZIP	WEST PALM BEACH FL 33413			INCEL ADDACSS			
TITLE	VPSD		1	ITY-ST-ZIP			
NAME		☐ DELETE	1	ITY-ST-ZIP		☐ Chang	e
STREET ADDRESS	PAGAN, LORETTA	☐ DELETE	1.4 CI	ITY-ST-ZIP	· · ·	☐ Chang	e 🗋 Addition
	113 LANDINGS BLVD.	_	1.4 CI 2.1 TF 2.2 N	ITY-ST-ZIP		☐ Chang	e
CITY-ST-ZIP	A40 LANDINGO DI VID		1.4 Cl 2.1 Tf 2.2 N 2.3 S 2.4 C	ITY-ST-ZIP ITLE AME TREET ADORESS			
TITLE	113 LANDINGS BLVD.	_	1.4 Cl 2.1 Ti 2.2 Ni 2.3 Si	ITY-ST-ZIP ITLE AME TREET ADORESS			e ☐ Addition
	113 LANDINGS BLVD.		1.4 Cl 2.1 Tf 2.2 N 2.3 S 2.4 C	ITY-ST-ZIP ITLE AME TREET ADDRESS CITY-ST-ZIP ITLE			
TITLE	113 LANDINGS BLVD. WEST PALM BEACH FL 33413		2.1 TF 2.2 NV 2.3 S' 2.4 C 3.1 TF 3.2 NV	ITY-ST-ZIP ITLE AME TREET ADDRESS CITY-ST-ZIP ITLE	A STATE OF THE STA		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	113 LANDINGS BLVD. WEST PALM BEACH FL 33413		1.4 CI 2.1 TI 2.2 NI 2.3 S' 2.4 C 3.1 TI 3.2 NI 3.3 S' 3.4 C 4.1 TI	ITY-ST-ZIP ITILE AME TREET ADDRESS CITY-ST-ZIP ITILE AME TREET ADDRESS CITY-ST-ZIP ITILE			e ⁻ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	113 LANDINGS BLVD. WEST PALM BEACH FL 33413	D'DELETE	1.4 Cl 2.1 Ti 2.2 Ni 2.3 S' 2.4 C 3.1 Ti 3.2 Ni 3.3 S' 3.4 C 4.1 Ti 4.2 Ni	ITY-ST-ZIP ITILE AAME TREET ADDRESS CITY-ST-ZIP ITILE AAME TREET ADDRESS CITY-ST-ZIP ITILE VAME		Chang	e ⁻ ∽ [_] Addition
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14. 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 or an attachment with an address, with all other like empowered.

SIGNATURE: