SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375.)

PROFIT CORPORATION ANNUAL REPORT
1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000093683 (7)

1. Corporation Name

LASUB, INC.

Principal Place of Business	Mailing Address
800 BRICKELL AVE SUITE 1100 MIAMI FL 33131	800 BRICKELL AVE SUITE 1100 MIAMI FL 33131

3. Date Incorporated or Qualified: 12/07/1995
3a. Date of Last Report: 12/07/1995

2. Principal Place of Business: 21 15706 SW 72 ST
Suite, Apt #, etc: 22
City & State: 23 MIAMI
Zip: 24 33193 Country: 25 USA

2a. Mailing Address: 26 6780 SW 81 TERR.
Suite, Apt #, etc: 27
City & State: 28 MIAMI
Zip: 29 33143 Country: 30 USA

4. FEI Number: 65-0635914 ☐ 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

9. **Name and Address of Current Registered Agent**

~~TOLAND, BRUCE J~~
~~800 BRICKELL AVE SUITE 1100~~
~~MIAMI FL 33131~~

~~EDITH CROSBY~~
6780 SW 81 TERR
MIAMI FL 33143

10. **Name and Address of New Registered Agent**

81 Name: ANDREA BOROWSKY
82 Street Address (P.O. Box Number is Not Acceptable): ~~801 Brickell Ave. Suite 1100~~
83 6780 SW 81 TERR
84 City: miami FL 85 Zip Code: 33131

11. Pursuant to the provisions of Sections 607.0502 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 607.0505, Florida Statutes.

SIGNATURE ANDREA BOROWSKY SECT. [signature] 8/6/96

12. OFFICERS AND DIRECTORS

TITLE	D	☐ DELETE
NAME	BOROWSKY, LEE	
STREET ADDRESS	11501 SW 92ND COURT	
CITY-ST-ZIP	MIAMI FL 33176	
TITLE	D	☐ DELETE
NAME	BOROWSKY, ANDREA B	
STREET ADDRESS	11501 SW 92ND COURT	
CITY-ST-ZIP	MIAMI FL 33176	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: [signature] ANDREA BOROWSKY 8/6/96 305 666 6888
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (3/96)