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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P96000001724 (9)

LBJ INVESTMENTS INC

Marling Address
901 PROGRESSO DR.
FT. LAUDERDALE FL 33304 US

FILED May 01 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/02/1996 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 65-0628701 21 26 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional Certificate of Status Desired Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country This corporation owes or has paid the current year Intargible 24 Yes 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SNIDER, JUANITA J 1940 NE 31ST CT. 82 Street Address (P.O. Box Number is Not Acceptable) LIGHTHOUSE POINT FL 33064 83 84 City Zip Code 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 objigations of Section 607.0505, Florida Statutes. 2-20-98 SIGNATURE (NOT) Registered Agent signature required whon reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 11 TITLE **SNIDER**, JUANITA J NAME 1.2 NAME 1940 NE 31ST CT. STREET ADDRESS 1.3 STREET ADDRESS LIGHTHOUSE POINT FL 33064 CITY-ST-ZIP 1.4 CITY-ST-ZIF DELETE Change Addition TITLE 217ITLE 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2 4 CITY-ST-ZIP CITY-ST-7IF DELETE 3.1 TITLE Change Addition TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP Change DELETE Addition 4.1 TITLE TITLE

6.4 CITY - ST- ZIP 14. Thereby 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 12 or Block 13 if changed, or on an attachment with an address

4 2 NAME

5.1 TITLE

5.2 NAME 5.3 STREET ADDRESS

61 TITLE 6.2 NAME

DELETE

DELETE

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.4 CITY - ST - ZIP

6.3 STREET ADDRESS

NAME STREET ADDRESS

TITLE

NAME

TITLE

NAME

CITY-ST-7IP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

1.01-98 954 525 8080

Change

Change

Addition

Addition