FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

STREET ADORESS

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000010659 (6)

THE LANDRY GROUP, INC.

Principal Place of Business Mailing Address 1125 NORTHWEST 126 COURT 1125 NORTHWEST 126 COURT MIAMI FL 33182 MIAMI FL 33182-2033 3. Date Incorporated or Qualified 3a. Date of Last Report 02/02/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0644168 26 Not Applicable Suite, Apt. #, etc. Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Ζip Country Country Zφ This corporation has liability for intangible tax under s. 199.032, Yes No 30 Florida Statutes 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 61 THE LAW FIRM OF LAWRENCE J SPIEGEL CHRTD 343 ALMERIA AVENUE CORAL GABLES FL 33134 83 scorons 607 0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered than, in the State of Florida Such change was authorized by the corporation's board of directors. It hereby accept the appointment as registered accept the obligations of accept the obligation of accept the obligation of acceptance 11. Pursuant to the provisions of office or registered agent agent. I am familiar with (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 13, (96/6) Change Addition PŠTD DELETE 1.1 TITLE THEF NAME LANDRY, KELLY L 1.2 NAME 1125 NORTHWEST 126 COURT 1.3 STREET ADDRESS \$1REET ADDRESS **MIAMI FL 33182** 1.4 CITY - ST - ZIP OUY-51-20 Change DELETE Addition THE 2.1 TITLE NAME 2.2 NAME STREET ABORESS 2.3 STREET ADDRESS 2.4 CITY - ST-ZIP CHY-SY-70 DELETE Change Addition 3.1 TITLE TELF 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST - ZIP COTY - ST - ZIP DELETE Change Addition 4.1 TITLE TIBLE 4. 2 NAME NAMA STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP DITY - ST- ZIP DELETE Change Addition THUE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CHY: ST 12 5.4 CITY-ST-ZIP DELETE Change Addition 61 TITLE [[]] 62 NAME LAM

6.3 STREET ADDRESS

64 City-St-ZiP

information indicated on this annumbroport or supplicatental 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 coporation of the report of that my name

14. I do 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

FILED
May 16 1997 8:00am
Secretary of State

