

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000010782 (6)

1. Corporation Name
THREE L INC.

Principal Place of Business

13771 LE BATEAU LANE
PALM BEACH GARDENS FL 33410
1445 Spillan Road
Yellow Springs, OH 45387

Mailing Address

13771 LE BATEAU LANE
PALM BEACH GARDENS FL 33410
1445 Spillan Road
Yellow Springs, OH 45387

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

9. Name and Address of Current Registered Agent

LANG, LEON
13771 LE BATEAU LANE
PALM BEACH GARDENS FL 33410

REINSTATEMENT

3. Date Incorporated or Qualified

02/02/1996

3a. Date of Last Report

4. FEI Number

65-0638948

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

10. Name and Address of New Registered Agent

81 Name

MARK LEMELMAN

82 Street Address (P.O. Box Number is Not Acceptable)

13221 BURGUNDY DRIVE, SOUTH

83

84 City

PALM BEACH GARDENS

FL

85 Zip Code

33410

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 of 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

October 10, 1997

12. OFFICERS AND DIRECTORS

TITLE D
NAME LANG, LEON
STREET ADDRESS 13771 LE BATEAU LANE
CITY-ST-ZIP PALM BEACH GARDENS FL 33410

TITLE D
NAME LEMELMAN, MARK
STREET ADDRESS 13221 BURGUNDY DRIVE S.
CITY-ST-ZIP PALM BEACH GARDENS FL 33410

TITLE D
NAME LEMELMAN, BRIAN
STREET ADDRESS 13221 BURGUNDY DRIVE S.
CITY-ST-ZIP PALM BEACH GARDENS FL 33410

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ESTATE OF LEON LANG
1.2 NAME 1445 SPILLAN ROAD
1.3 STREET ADDRESS YELLOW SPRINGS, OH
1.4 CITY-ST-ZIP 45387

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
100002338931-4
-11/05/97-01070-012
****750.00 ****750.00

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE DIRECTOR
4.2 NAME MICHAEL D. LANG
4.3 STREET ADDRESS 1445 SPILLAN ROAD
4.4 CITY-ST-ZIP YELLOW SPRINGS, OH 45387

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 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

Mark Lemelman

9/5/97

9/5/97

CR2E034 (4/97)