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

PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Apr 22 1997 8:00am

Secretary of State

(305)255-4220

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P96000013534 (8)

JOSEPH LAURENZANO DESIGNS, INC.

			•				
Poncipal Piar	ne of Business	Mailing Address				IS MÁIDE SIDAS ISIDE DESI	IP 10110 9101 FD01
8888 SW 129 TERRACE 8888 SW 129 TERRACE MIAMI FL 33178 MIAMI FL 33178-5945							
					3. Date Incorporated or Qualified 02/12/1996	3a. Date of La	ist Report
<u> </u>	Place of Business	2a. Mailing Address			4. FEI Number		Applied For
21	<u>.</u>	26			65-0656000		Not Applicable
Suite, Apt [22]		Suite, Apt. #, etc.			5. Certificate of Status Desired	4	75 Additional e Required
City & Sta 23		City & State			Election Campaign Financing Trust Fund Contribution		.00 May Be ded to Fees
Ζιρ [24]	Country 25	Z(p 29	Country 30		8. This corporation has liability for Florida Statutes	intangible tax und Yes [2 No	er s. 199.032,
	9. Name and Address of Curr	ent Registered Agent			10. Name and Address of New Re	gistered Agent	
	URENZANO, JOSEPH		81	Name	•		
8888 SW 129 TERRACE MIAMI FL 33176			82	82 Street Address (P.O. Box Number is Not Acceptable)			
			83				
	The second secon			Dity		FL T	Zip Code
Office or	registered agent, or both, in the Sta	ate of Florida. Such change was	authorized by the	amed corp le corporat	poration submits this statement for the pion's board of directors. I hereby acce	ourpose of changi of the appointmen	ng its registered It as registered
·	am familiar with, and accept the obt	ligations of, Section 607.0505, F	lorida Statutes.				
SIGNATURE	Bur atom typind or proved manic of legistered s	agent and little diagolicable (NO	TE: Registered Agent	lanature requir	ed when reinstating)	DATE	
12.		AND DIRECTORS	13.	3 141010 15401	ADDITIONS/CHANGES TO OFFIC		TORS IN 12
DILE	PD	☐ DELETE	1.1 TITLE	1		V2 0:	
HAME	LAURENZANO, JOSEPH		1.2 NAME	1	ouvenzano, Joseph	- 1 ml 1	7 // m
STHELL ADDRESS	18555 SW 89 COURT		1.3 STREET AD	DAESS 13	3100 S.W. 42 AU	e, Apri	2410
CITY - ST - ZIP	MIAMI FL 33157		1.4 CITY-ST-7	DP M	3100 S.W. 92 Au 11 Ami , FC 33	174	
THILE	SD SOME A	☐ DELETE	2.1 TITLE	D/	oman, Cesar A.	□ Cha	nge 🔲 Addition
NAME _	ROMAN, CESAR A		2.2 NAME		100 S.W. 92 Au	. 4.4	11 4/n
STREET ADDRESS	18555 SW 89 COURT MIAMI FL 33157		23 STREET AD	DRESS 10	5.60. 92.76	c, api	
CITY-ST-7P*	MIAMI FL 33137	DELETE	2.4 CITY-SY-	ZIP / T	I.Ami, FL 331		Dalastina
NAME		· FT DETELE	31 TITLE		s -	. ☐ Cha	nge 🔲 Addition
STREET ACTURESS			32 NAME , 33 STREET AD	1			
CI*Y-\$1-7IP				DOCCC I			
1011							
		DELETE	3 4. CITY-ST-			Cha	ine Addition
NAME		DELETE	34. CITY-ST- 41 TITLE			Cha	nge Addition
NAME STHEET ADDRESS		DELETE	34. CITY-ST- 41 TITLE 4. 2 NAME	ZIP		☐ Cha	nge Addition
			34. CITY-ST- 41 TITLE	ZIP DRESS		☐ Cha	nge Addition
\$1HEET ADDRESS			34. CITY-ST- 4 1 TITLE 4. 2 NAME 4.3 STREET AD	ZIP DRESS		☐ Cha	
STREET ADDRESS CCY+\$T+712		,	34. CITY-ST- 41 TITLE 4.2 NAME 43 STREET AD 44 CITY-ST-2	ZIP DRESS			
STHEEL ADDRESS DOLY - ST - 702 THEE		,	34. CITY-ST- 41 TITLE 4.2 NAME 4.3 STREET AD 4.4 CITY-ST-2 5.1 TITLE	ZIP DRESS IP			
STHEET ADDRESS DOY-ST-7P THEE NAME		,	34. CITY-SY- 41 TITLE 4. 2 NAME 4.3 STREET AD 4.4 CITY-SY-2 5.1 TITLE 5.2 NAME	DRESS DRESS			
STHEEL ADDRESS CUTY-ST-702 THEE NAME STREET ADDRESS		,	34. CITY - SY- 41 TITLE 4. 2 NAME 4.3 STREET AD 4.4 CITY - SY- 5.1 TITLE 5.2 NAME 5.3 STREET AD	DRESS DRESS			nge Addition
STREET ADDRESS COYESTE 71P THEE NAME SPREET ADDRESS CHY STEEP		DELETE	34. CITY-SY- 41 TITLE 4. 2 NAME 43 STREET AD 44 CITY-SY- 51 TITLE 52 NAME 53 STREET AD 54 CITY-SY- 51 CITY-SY-	DRESS DRESS		☐ Cha	nge Addition
STHEET ADDRESS COTY - STEP THEE MAME STREET ADDRESS CRY - STEP THEE THEE		DELETE	34. City-Sy- 41 Title 4. 2 Name 4.3 Street ad 4.4 City-St-2 5.1 Title 5.2 Name 5.3 Street ad 5.4 City-Si-2 6.1 Title	ZIP DRESS IP DRESS		☐ Cha	nge Addition

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.