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

PROFIT CORPORATION ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

IVISION OF CORPORATIONS

FILED Feb 04 1998 8:00am Secretary of State

	1990	N TE	JIVISION OF C	JORPORATIO	OI42			
DOCUMENT # P96000026443 (7) LANE GILBERT, INC.								
Principal Place	on of Business	Mailton Ade	deono				DEO BUEL DIQUE 1410	
Principal Place of Business Mailing Address								
B201 NW 71 AVE 8201 NW 71 AVE TAMARAC FL 33321 TAMARAC FL 33321								
						DO NOT WRITE IN THIS	SPACE	
						3. Date Incorporated or Qualified 03/26/1996	•	
2. Principal I	Place of Business	2a. Maitino	Address			4. FEI Number	1 1	olied For
21	1 26					65-0653025		Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						\$8.75 A		
22 27						5. Certificate of Status Desired	Fee Rec	
	City & State City & State					6. Election Campaign Financing	\$5.00	May Re
23	28					Trust Fund Contribution	Added to	
Zip	Country Zip			Country		8. This corporation owes or has paid the cu	irrent year Inta	ngible
24	25	29	l	30			Yes 🔽	No
	9. Name and Address of Cu	rrent Hegistered Ag	ent	81	Name	10. Name and Address of New Registered	Agent	
	LBERT, LANE			61	Name			
8201 NW 71 AVE TAMARAC FL 33321					Street Add	dress (P.O. Box Number is Not Acceptable)		
174	MARIAC FL 33321			83				
				00				
				84	City	FL	85 Zip C	ode
11. Pursuant	to the provisions of Sections 607	0502 and 607 1508 I	Florida Statuto	e the above	named cor	reporation submits this statement for the surgesses	e	
office or agent. I a	registered agent, or both, in the S am familiar with, and accept the ol	tate of Florida. Such obligations of, Section	change was a 607.0505, Flor	uthorized by rida Statutes	the corpora	rporation submits this statement for the purpose of ation's board of directors. I hereby accept the ap	pointment as r	egistered
SIGNATURE								
12.	Signature, typed or printed name of registered		(NOTE		ni signature requ	ulred when reinstating) DATE		i
TITLE	OFFICERS AND DIRECTORS DELETE			13. 1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS AN	Change	Addition
NAME	GILBERT, LANE			1.2 NAME			Onlings	E Rodillon
STREET ADDRESS	8201 NW 71 AVE			1.3 STREET ADDRESS				18
CITY-ST-ZIP	TAMARAC FL		1.4 CITY-ST-ZIP				L	
TITLE	DFLETE		DFLETE	2.1 TITLE			Change	Addition
NAME				22 NAME			Land Ottoring	
STREET ADDRESS				2.3 STREET A	ADDRESS			
CITY-ST-ZIP				2. 4 CITY-S				
TITLE			DELETE	3.1 TITLE			Change	Addition
NAME				3.2 NAME				
STREET ADDRESS				3.3 STREET A	ADDRESS			Ī
CITY-ST-ZIP				3.4 CITY-ST	T-ZIP			
TITLE			DELETE	4.1 TITLE			Change	Addition
NAME				4 2 NAME				
STREET ADDRESS				4.3 STREET /	address			ĺ
CITY-ST-ZIP				4.4 CHY-ST	- ZIP			
TITLE		L.	DELETE	5.1 TITLE]		Change	Addition
NAME				5.2 NAME	-			
STREET ADDRESS				5.3 STREET A	ADDRESS			
CITY-ST-ZIP			Therese	5.4 CITY-ST	- ZIP			
TITLE		L	DELETE	6.1 TITLE			Change	Addition
NAME				6.2 NAME				
STREET ADORESS				6.3 STREET A				
CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the					-ZIP	Cooling 110 07/21/0 Florida Olatica 17	-416 - 46 - + 41	
· · · · · · · · · · · · · · · · · · ·	very mar mo imormation supplied	z mini mus ming does	not quality for	nic exempti	บบ รเสเยช ไท	i ουσίου Τταιυτίσλα), Florida Statutes. I further ce	eruty that the in	rormation

14. I 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 roport 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 in 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 attact from with an address.

CIONATURE.

Jacker