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

PROFIT CORPORATION ANNUAL REPORT 1998

CITY-ST-ZIP



**FILED** 

Jan 22 1998 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## P96000041705 (0) DOCUMENT #

LESSER-TRIFF CONSULTING, INC.				: :	
Principal Plac	ce of Business	Mailing Address			E: 11011 1041L 86(8) 4111 169L
1800 S.W. 27TH AVE. 1800 S.W. 27TH AVE.					
APT. 301 APT. 301					22.05
MIAMI FL 33145 MIAMI FL 33145				DO NOT WRITE IN THIS S	SPACE
us		U\$		3. Date Incorporated or Qualified	
	····	A-4-13-4-3		05/15/1996	-
2. Principal Place of Business 2a. Mailing Address			4. FEI Number	Applied For	
21 26			65-0666091	Not Applicable	
Suite, Apt. #, etc.		<del></del> -	5. Certificate of Status Desired	\$8.75 Additional	
22 27				Fee Required	
City & State		City & State		6. Election Campaign Financing	<b>\$5.00</b> May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the curr	
24	25	29	30	Personal Property Tax due June 30,  10. Name and Address of New Registered A	Yes No
<u> </u>	9. Name and Address of Curre	ent Registered Agent	81 Name	10, Name and Address of New Registered A	Agent
LESSER, KARL					
1	300 S.W. 27TH AVE. 301		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
MIAMI FL 33145			83		
			84 City	FL.	85 Zip Code
		00 1 000 4000 Florida Olaba	<u> </u>		abandan ita ragistarad
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 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					
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	LESSER, KARL		1,2 NAME		
STREET ADDRESS	2519 TIGERTAIL AVE.		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33133		1,4 CITY - ST - ZIP		
TITLE	D	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	LESSER, DANIA		2.2 NAME		
STREET ADDRESS	2931 S.W. 19TH TERRACE		2.3 STREET ADDRESS		ļ
CITY-ST-ZIP	MIAMI FL 33145		2. 4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME		_	3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		1
			3.4. CITY-ST-ZIP		
CITY - ST - ZIP		DELETE	4.1 TITLE		Change Addition
			4.2 NAME		
NAME					
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		DCI CTC	4.4 CITY-ST-ZIP		Change Addition
TATLE		☐ DELETE	5.1 TITLE		☐ oughthe ☐ vocition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY - ST - ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
SYREET ADDRESS			6.3 STREET ADDRESS		

14. Thereby 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 is true and accurate and that my signature shall have the same legal effect as if made under cath; 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 change?, or on an attachment with an address. (305) 9-2429