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**PROFIT
CORPORATION
ANNUAL REPORT
1999**


FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000055613

1. Corporation Name

LIFESTYLES INTERNATIONAL CLUB, INC.

Principal Place of Business

 169 E. FLAGLER ST.
SUITE 1527
MIAMI FL 33131

Mailing Address

 169 E. FLAGLER ST.
SUITE 1527
MIAMI FL 33131

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/28/1996

4. FEI Number

65-0691942

Applied For

Not Applicable

5. Certificate of Status Desired ☐
 \$8.75 Additional
Fee Required

 8. Election Campaign Financing
Trust Fund Contribution ☐

 \$5.00 May Be
Added to Fees

 8. This corporation owes the current year Intangible
Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business

21 1221 BRICKELL AVE

2a. Mailing Address

26 1221 BRICKELL AVE

Suite, Apt. #, etc.

22 SUITE 909

Suite, Apt. #, etc.

27 SUITE 909

City & State

23 MIAMI FL

City & State

28 MIAMI FL

Zip

24 33131

Country

Zip

29 33131

Country

30

9. Name and Address of Current Registered Agent

 THOMPSON, DISNEY D
169 E. FLAGLER ST.
SUITE 1527
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

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SIGNATURE:

 [Signature] **DATRIEN A. ALLEY**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

3/19/99 305-998266

Daytime Phone

 [Signature] **RENZO BOHORQUEZ**
 DATE

RENZO BOHORQUEZ

3/30/99 305-3729292

DATE

CR2E034 (11/98)