## PROFIT CORPORATION ANNUAL REPORT

1999



## FLORIDA DEPARTMENT OF STATE

## Kathorine Harris

Secretary of State
DIVISION OF CORPORATIONS

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DOCUMENT N	<b>「 ひししししししつひしとし</b>
1. Comoration Name	

LPE ENTERPRISES INC.

Mailing Address

## FILED Mar 14, 1999 8:00 am Secretary of State

03-14-1999 90037 013 \*\*\*150.00



	of Business							
798 PONCE DE	LEON RD	798 PONCE DE LEON RD						
<b>BOCA RATON F</b>		BOCA RATON FL 33432				DO NOT WRITE IN THIS SPACE		
							15 SPACE	
	•					3. Date Incorporated or Qualifed		1
	•				_	07/15/1996		
2 Principal Pt	ace of Business	2a. Mailing Address				4. FEI Number	· Ap	plied For
		26				22-3456854	. No	t Applicable
27)	# ata	Suite, Apt. #, etc.					\$8.75	dditional
Suite, Apt. #	*, etc.	— · ·				5. Certifcate of Status Desired	Fee Re	
22		27 City & State					\$5.00	10 mm
City & State	,	<b>⊢</b> •				6. Election Campaign Financing	Added t	
23		28				Trust Fund Contribution		0.1003
Zip	Country	Zip	ு வே	intry		8. This corporation owes the current year		
24	25	293	10			Personal Property Tax.	☐ Yes	No
	9. Name and Address of Currer	nt Registered Agent		L.		10. Name and Address of New Registere	d Agent	
				81	Name .			1
ESNE	es, lauren p					(D.O. Bay Mumbas is Not Assentable)		
	PONCE DE LEON RD			82	Street Addi	ress (P.O. Box Number is Not Acceptable)		}
	A RATON FL 33432			83				
000	A TATION I E BOTOE			"				
	•			84	City		85 Zip (	Coda
				1 1	-	F	_	
11. Pursuant t	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes	, the a	bove	-named corp	poration submits this statement for the purpose	of changing its	registered
	egistered agent, or both, in the State m familiar with, and accept the obliga					on's board of directors. I hereby accept the app	JOHNSTREIN GS 10	31316160
agent. i ar	m tamiliar with, and accept the obliga	Illions of, Section 607.0505, Fight	برواد مر	uios.		•		ľ
SIGNATURE						d when reversiting) DATE		
	Signature, typed or printed name of registered age			- Agent	Influenting reduce	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12
12.		NO DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICE ICE	Change	Addition
TITLE	P	☐ DELETE	1.1 TT	TLE,	[			]
NAME	esnes, lauren p		1.2 NA	AME.	l l			i
STREET ADDRESS	798 PONCE DE LEON ROAD		13 51	TREET A	ADDRESS			
ř	BOCA RATON FL 33432		140	TY-ST-	.710			
CITY-ST-ZIP	BOOK INTOITE GOTGE	☐ DELETE	2.1 TI				☐ Change	☐ Addition
III/TE		LJ 500010	2		i			}
NAME								
STREET ADDRESS			22 N	AME				ŀ
		•	1		ADDRESS			
1			23 ST					<u> </u>
CITY-ST-ZIP		☐ DELETE	23 ST	IREET/			☐ Change	Addition
CITY-ST-ZIP			23 ST 2.4 CI 3.1 TI	TREET / STY-ST				Addation
CITY-ST-ZIP		DELETE	2.3 ST 2.4 CI 3.1 TII 3.2 NV	TREET / STY-ST TUE AME	1-ZIP			Addition
CITY-ST-ZIP		DELETE	23 ST 2.4 CD 3.1 TH 3.2 NV 3.3 ST	TREET / TUE AME TREET /	ADDRESS			Addition
CITY-ST-ZIP TITLE NAME			23 ST 2.4 CI 3.1 TII 32 NV 3.3 ST 3.4 CI	TREET/ TUE AME TREET/ TREET/	ADDRESS		☐ Change	
CITY-ST-ZIP TITLE NAME STREET ADDRESS		OBLETE	23 ST 2.4 CD 3.1 TH 3.2 NV 3.3 ST	TREET/ TUE AME TREET/ TREET/	ADDRESS			Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE			23 ST 2.4 CI 3.1 TII 32 NV 3.3 ST 3.4 CI	TREET / TUE AME TREET / TITLE	ADDRESS		☐ Change	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME			23 ST 2.4 CO 3.1 TO 3.2 NV 3.3 ST 3.4. CO 4.1 TO 4.2 N	TREET/ TUE AME TREET/ TUE TILE AME	ADDRESS		☐ Change	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS			23 ST 2.4 CD 3.1 TU 3.2 W 3.3 ST 3.4. CD 4.1 TU 4.2 N 4.3 ST	TREET / TUE  AME TREET / TUE  TREET / TUE  TREET /	ADDRESS 1-ZIP ADDRESS		☐ Change	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	29 ST 2.4 CD 3.1 TM 3.2 NV 3.3 ST 3.4. CD 4.1 TM 4.2 NV 4.3 ST 4.4 CD	TREET / TUE  AME TREET / TUE  TREET / TUE  TREET / TUE  TREET / TY-ST- TTY-ST-	ADDRESS 1-ZIP ADDRESS		Change	☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS			29 ST 2.4 CO 3.1 TII 3.2 N/ 3.3 ST 3.4 CO 4.1 TII 4.2 N/ 4.3 ST 4.4 CO 5.1 TII	TREET / TUE  AME  TREET / TUE  AME  TREET / TUE  TREET / TUE  TREET / TUE  TREET / TUE  TREET /	ADDRESS 1-ZIP ADDRESS		☐ Change	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	23 ST 2.400 3.1 TU 3.2 NV 3.3 ST 3.4. CD 4.1 TU 4.2 N 4.3 ST 4.4 CD 5.1 TU 5.2 NV	TREET / TUE  AME  TREET / TILE  LAME  TREET / TILE  TREET / TILE  AME	ADDRESS 1-ZIP ADDRESS -ZIP		Change	☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		☐ DELETE	23 ST 2.400 3.1 TU 3.2 NV 3.3 ST 3.4. CD 4.1 TU 4.2 N 4.3 ST 4.4 CD 5.1 TU 5.2 NV	TREET / TUE  AME  TREET / TILE  LAME  TREET / TILE  TREET / TILE  AME	ADDRESS 1-ZIP ADDRESS		Change	☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS		☐ DELETE	23 ST 2.4 CD 3.1 TU 3.2 N/ 3.3 ST 3.4. CD 4.1 TU 4.2 N/ 4.3 ST 4.4 CD 5.1 TU 5.2 N/ 5.3 ST	TREET / TUE  AME  TREET / TILE  LAME  TREET / TILE  TREET / TILE  AME	ADDRESS T-ZIP ADDRESS -ZIP ADDRESS		Change	☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	23 ST 2.4 CD 3.1 TU 3.2 N/ 3.3 ST 3.4. CD 4.1 TU 4.2 N/ 4.3 ST 4.4 CD 5.1 TU 5.2 N/ 5.3 ST	TREET/STITLE	ADDRESS T-ZIP ADDRESS -ZIP ADDRESS		Change	☐ Addition
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CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	23 ST 2.4 CD 3.1 TM 3.2 NV 3.3 ST 3.4. CD 4.1 TM 4.2 NV 4.3 ST 4.4 CD 5.1 TM 5.2 NV 5.3 ST 5.4 CD 6.1 TM 6.2 NV 6.2 NV 6.2 NV 6.3 ST 6.2 NV 6.3 NV 6.	TREET // ST TUE  AME  TREET // ST TUE  AME  TREET // ST TUE  AME  TREET // ST TUE  TREET //	ADDRESS 1-ZIP ADDRESS -ZIP		Change	☐ Addition ☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TREET ADDRESS CITY-ST-ZIP TITLE TREET ADDRESS CITY-ST-ZIP TITLE		☐ DELETE	23 ST 2.4 CD 3.1 TM 3.2 NV 3.3 ST 3.4. CD 4.1 TM 4.2 NV 4.3 ST 4.4 CD 5.1 TM 5.2 NV 5.3 ST 5.4 CD 6.1 TM 6.2 NV 6.2 NV 6.2 NV 6.3 ST 6.2 NV 6.3 NV 6.	TREET // ST TUE  AME  TREET // ST TUE  AME  TREET // ST TUE  AME  TREET // ST TUE  TREET //	ADDRESS T-ZIP ADDRESS -ZIP ADDRESS		Change	☐ Addition ☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME		☐ DELETE	23 ST 2.4CC 3.1 TO 3.2 N/2 3.3 ST 4.4 CC 5.1 TO 5.2 N/2 5.3 ST 5.4 CC 6.1 TO 6.3 ST 6.4 CC 6.	TREET/STTUE  AME  TREET/STTUE  AME  TREET/STTUE  AME  TREET/STTUE  AME  TREET/STTUE  AME  TREET/STTUE  TREET/	ADDRESS -ZP ADDRESS -ZP ADDRESS -ZP	Section 119.07(3)(i), Florida Statutes, I further	Change	Addition Addition Addition

4. 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 report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 ph) an attachment with an address, with all other like empowered.

SIGNATURE:

RECONSTURE REQUIRED

THE AND TYPED ON PRINTED NAME OF ELONDARD OFFICER ON DIRECTOR

TANK P AND THE TANK OF ELONDARD OFFICER ON DIRECTOR

4/15/99

Tolysma Phone 8 800 - 573 -573