May 10, 1999 8:00 am Secretary of State

05-10-1999 90198 017 \*\*\*150.00

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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000061356

1. Corporation Name,

L.J. & COMPANY, INC.

Principal Place	of Business	Mailing Address			, , , , , , , , , , , , , , , , , , , ,		e (*)	
L I & COMPANY INC 7031 GRAND NA		7031 GRAND NATIONAL DR	NATIONAL DR					
7031 GRAND NATIONAL DR. SUITE 103 SUITE 103			ì		DO NOT WRI	TE IN THIS	SPACE	
ORLANDO FL 32819 ORLANDO FL 32819				3. Date Incorporated or Qualifed		JI AGE		
US		US			07/23/1996			
2 Deineinel Ci	non of Brusinans	2a. Mailing Address			4. FEI Number		App	lied For
——————————————————————————————————————		<b>⊢</b> •			59-3390197			Applicable
26     Suite, Apt. #, etc.   Suite, Apt. #, etc.				33 3030 101		\$8.75 Ad		
22 27 27					5. Certifcate of Status Desired		Fee Req	
	City & State City & State				6. Election Campaign Financing		\$5.00 N	lav Be
	ty & State 28		T .		Trust Fund Contribution			Fees
Zip	Country	Zip	Country	1	8. This corporation owes the curr	rent vear Inta		
·		29 3	¬ ·		Personal Property Tax.	on your mic	∐Yes [	ZNo
24	9. Name and Address of Current		1		10. Name and Address of New	Registered A		
	3. Name and Address of Oditoris	registored rigeris	81	Name				
LACY, PAUL 7031 GRAND NATIONAL DR SUITE 103			82	Street Add	dress (P.O. Box Number is Not Accept	able)		
			83					
ORLANDO FL 32819								
ONE-MIDO TE GEOTO			84	City		FL	85 Zip C	ebc
11 Pureuant	to the provisions of Sections 607 0502	and 607.1508. Florida Statutes	the abov	e-named cor	poration submits this statement for the	numose of	changing its r	egistered
office or r	egistered agent, or both, in the State on familiar with, and accept the obligation	t Florida. Such change was aut	norizeu uv	trie corborat	ion's board of directors. I hereby acce	pt the appoir	itment as reg	stered
SIGNATURE						DATE		
organizate, types of prince that is regional age.			13.	nt signature requi	red when reinstating) ADDITIONS/CHANGES TO OF		D DIRECTOR	RS IN 12
12.		DELETE	1.1 TITLE		ADDITIONS/OTANGED TO GE	TIOE NO THE	Change	Addition
TITLE	PT						щ <b>v</b>	_
NAME			1 2 NAME					
STREET ADDRESS	7031 GRAND NATIONAL DRIVE	SUITE 103		TADDRESS				ļ
CITY-ST-ZIP	ORLANDO FL	DECETE.	1.4 CITY-5	ST-ZIP		_	Change	Addition
TITLE	VPS	☐ DELETE	2.1 TITLE				□ onango	
NAME INGRAM, MARK			2.2 NAME					
STREET ADDRESS 7031 GRAND NATIONAL DRIVE, SUITE 103								
CITY-ST-ZIP	Orlando fl	, SUITE 103	2.3 STREE	TADDRESS				
TITLE			2. 4 CITY-1			<u> </u>		- Addision
NAME		, SUITE 103					☐ Change	☐ Addition
10 UNL			2. 4 CITY-1			_	☐ Change	☐ Addition
STREET ADDRESS	* **nor		2. 4 CITY-3 3.1 TITLE 3.2 NAME				☐ Change	☐ Addition
		☐ DELETE	2. 4 CITY-3 3.1 TITLE 3.2 NAME	ST-ZIP				
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CITY-ST-ZIP 🔩 14. 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 comporation or the receiver of ristee 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 oddress, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

**SIGNATURE** 

NAME

STREET ADDRESS