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

PROFIT CORPORATION **ANNUAL REPORT**



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P9600061544

-LANJA, INC .-LANGER ENERGY

FILED Feb 12 1997 8:00am Secretary of State



Principal Place of Business	Mailing Address	ing Address			I CONTROOR HE TOHIS ONLY ONLY CONTROOMS CONTROOMS START FIRST CONTRO		
4995 PONCE DE LEON BLVD CORAL GABLES FL 33146	4995 PONCE DE LEON BLVI CORAL GABLES FL 33146-20				}		
					3. Date of Last Report 07/23/1996		
2. Principal Place of Business 2a. Mailing Address					4. FET Number Applied Fo	or .	
21 26					65-0715016 Not Applie		
Suite, Apt. #, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired [] \$8.75 Addition Fee Required	al	
City & State	City & State				6. Election Campaign Financing \$5.00 May Be		
23	28				Trust Fund Contribution Added to Foes		
Zip Country	Country Z(p)		Country		8. This corporation has liability for intangible tax under s. 199.03	12,	
24 25 25 Current	25 29 30 30 30 30 30 30 30 30 30 30 30 30 30				f lorida Statutes		
BARBER, H E	Registered Agent		81	Name	IO, Name and Address of New Registered Agent	۱ ۱	
335 NE 101 STREET			82	Cupal Addra	one (D.C. Den Nivesher in Net Accombable)	}	
MIAMI SHORES FL 33138		[82	Sacet Modic	oss (P.O. Box Number is Not Acceptable)		
		[83				
•			84	City	85 Zip Code		
dd Dagaraldo the wante and d Castiana 602 0100	and constitute builties builties	ا مالا			FL		
office or registered agent, or both, in the State of	and 607, 1506, Florida Statutes of Horida, Such change was au	thorized	by	the corporation	oration submits this statement for the purpose of changing its regist on's board of directors. I hereby accept the appointment as registe	red	
agent. I am familiar with, and accept the obligat	ions or, Section 607.0505, Flori	ida Statu	же	S.]	
SIGNATURE Signature typed or printed name of regions of a gion	and title if applicable (NOTE: I	Fing stored	Age	r, signature require	st wher reinstating) DAYs	}	
12. OFFICERS AND	the second secon	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	(
	LANGER, JACK				L_I Change L_I Ad	Somon	
STREET ADDRESS 4995 PONCE DE LEON BLVD		12 NAI		AODRESS			
CITY-ST-ZIP CORAL GABLES FL 33146		1.4 CIT		- 1		l	
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NAME		2.2 NA	Mi				
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STREET ADDRESS				ADDRESS		}	
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CITY-S1-ZIP		5.4 011		J	~) V		
TITLE	DELETE	61100	ιΓ		☐ Change ☐ Ac	ldition	
NAME		6.2 NA			800002086318	[
STREET ADDRESS		•		ADDRESS	-02/13/9701007056 ***165.00	}	
CITY-ST-ZIP 14 I do bereby certify that the information supplied	with this filma does not austifu	for the o			李季年1700、UBJ 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 offect as if made under oath; 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 13 if charges, or on an attachment with an address.

1/20/97 (305) 669-9053