COR ANNU	PROFIT PORATION JAL REPORT 1997	FLORIDA DEPART Saritra B: Secretary DIVISION OF C	r Mortham y of State	-	1997 8:00a ary of State
LRC & C	COMPANY GIFT SHOP & G/	Mailing Address P.O. BOX 415143 MIAMI BEACH FL 33141-514	43		
				 Date Incorporated or Qualified 08/26/1996 	3a. Date of Last Report
Principal Pl	ace of Business	28, Mailing Address		4, FEI Number	Applied For
Suite, Apt.	Biscargne Blud,	26 9 & /	ne	65-0699824	Not Applicab
	N/A	27 NA.		5. Certificate of Status Desired	Fee Required
City & State	smi, Florida.	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for	
13313	30 25 Jade 9. Name and Address of Curren		30	Florida Statutes	Yes HYNO
AME	RILAWYER CHARTERED		81 Name	Glime	-
343	ALMERIA AVENUE		82 Street Add	dress (F.O. Box Number is Not Acceptal	ole)
COR	AL GABLES FL 33134		83		
			84 City		FL 85 Zip Code
 agent. I a 	m familiar with, and accept the obligation	ations of, Section 607.0505, Flo	rida Statutes.	rporation submits this statement for the ation's board of directors. I hereby acce	
SIGNATURE	Signature, typed or printed name of registered age OFFICERS ANI	D DIRECTORS	: Registered Agent signature requ 13.	ured when reinstating) ADDITIONS/CHANGES TO OFFI	
12. IITLE	OFFICERS AND		: Registerod Agent signature requ 13. 1.1 TITLE		
12. ITLE IAME	OFFICERS AND PSTD CONDESO, LILLIE T	D DIRECTORS	: Registerod Agent signature requ 13. 1.1 TITLE 1.2 NAME		CERS AND DIRECTORS IN 12
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