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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham-

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000071981 (0)

LHBC HOLDINGS, INC.

FILED Apr 07 1998 8:00am Secretary of State



77 -	5 50				
Principal Place of Br	usiness	Mailing Address		A HARANDA AND INDIA ONITH OPERA DOVIN DODIE	
7777 GLADES ROAD STE 410 7777 GLADES ROAD ST BOCA RATON FL 33434 BOCA RATON FL 33434			DO NOT WRITE IN	N THIS SPACE	
				3. Date Incorporated or Qualified	
9. Principal Place o	d Duninger	To Mailing Address		08/29/1996	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt. W. etc.		Suite, Apt. #, etc.		62-1652188	Not Applicable \$8.75 Additional
22 City & State		27 City & State			Fee Required
23		28		Election Campalgn Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid	
24	25	29	30	Personal Property Tax due June 30	
	Name and Address of Current			10. Name and Address of New Regis	
GORZEC	CK, RANA M		81 Name	La CCon.	
TONO>				ress (P.O. Box Number is Not Acceptable	<u> </u>
			7777	Glades Road	,
•			83 Suite	41()	
			84 City	410	85 Zip Code
			Bocal	<u>Zaton</u>	FL 153434
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. A 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 familia with an accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE Signature, typod or promod course of the gest-ored signat and tries if a Day able (NOTE Registered Agent signature required when reinstalling) DATE					
12.	ire, typed or printed name of registered agent OF FICERS AND		TE Registered Agent signature requirements.	ADDITIONS/CHANGES TO OFFICE	
TITLE D		DELETE	1.1 TITLE	ADDITIONO/OFFARGES TO OFFICE	Change Addition
	IENER, ELLIOT M	_	1.2 NAME		_ , _
	777 GLADES ROAD STE 410		1.3 STREET ADDRESS		
l l	OCA RATON FL 33434		1.4 City-St-ZiP		
TITLE D		DELETE	2.1 TITLE		Change Addition
NAME W	EST, ALFRED G		2.2 NAME		
STREET ADDRESS 77	777 GLADES ROAD STE 410		2.3 STREET ADDRESS		
CITY-ST-ZIP BC	OCA RATON FL 33434		2.4 CITY-ST-ZIP		
TITLE D		☐ DELETE	3.1 TITLE		Change Addition
	oyos, Jeffrey		3.2 NAME		
	777 GLADES ROAD STE 410		3.3 STREET ADDRESS		
	OCA RATON FL 33434		3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TOTLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		1
CITY-ST-ZIP		Library	4.4 CITY-ST-ZIP		Channe Lagran
TITLE		☐ DELETE	5.1 TITLE		Change - Addition
NAME PTOTEST ADDRESS			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY - ST - ZIP 6.1 TITLE	77 - 77 - 77 - 77 - 77 - 77 - 77 - 77	Change Addition
NAME		LJ bittit	6.2 NAME		LI Guarille LI Modition
STREET ADORESS			6.3 STREET ADDRESS		}
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
	that the information supplied with	hthis filing does not qualify		Section 119.07(3)(i), Florida Statutes. I ful	rther certify that the information

indicated on this annual report or supplemental an officer or director of the corporation or the receiver Block 12 or Block 13 if changed, or on an attachm report is true and acclirate and that my signature shall have the same legal effect as if made under oath; that I am an ustue crippowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE: