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 # 1. Corporation Name

P96000074422 (2)

L.A. LADY, INC.

FILED May 01 1998 8:00am Secretary of State

					RU ANATO ANAKA WANA WANA HARU	
Principal Place of Business	Mailing Address			* 1001 7 01 410 10110 6 1111 4 0111 06111 6 0111 8 0111 10	1816 B1844 B1848 11810 1181 1881	
7785 NW 44TH ST	7785 NW 44TH ST					
SUNRISE FL 33351	SUNRISE FL 33351					
US	US			DO NOT WRITE IN THIS	3 SPACE	
				 Date Incorporated or Qualified 09/09/1996 		
2. Principal Place of Business	2a. Mailing Address			4. FEI Number	Applied For	
21	26			65-0700208	Not Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional	
22	27			o. Solution of Grand States	Fee Required	
City & State	City & State			6. Election Campaign Financing	\$5.00 May Be	
23	28]	1		Trust Fund Contribution	Added to Fees	
Zip Country	Zip	Country	!	8. This corporation owes or has paid the c		
25 25 9, Name and Address of Current	29 Pagistared Agent	30		Personal Property Tax due June 30. 10. Name and Address of New Registered	Yes No	
WARNER, GREGG	Hegistereo Agont	81	Name	IU, Marile and Address of New Hegistere	a Agent	
2682 OAKMONT		L				
FORT LAUDERDALE FL 33332		82	Street Addr	ress (P.O. Box Number is Not Acceptable)		
FORT DAUDERDALE FL 33332		83	 			
		84	City		85 Zip Code	
44 Pursuant to the provisions of Specions 607.0502	and 607 1508 Florida Statu	tes the abov	e-named corr	poration submits this statement for the purpose	of changing its registered	
11. Pursuant to the provisions of Sections 607.0502 office or registered agent, or both, in the State of	f Florida. Such change was	authorized b	y the corporat	ion's board of directors. I hereby accept the ap	pointment as registered	
agent. I am familiar with, and accopt the obligat	ions of, Section 607.0505, Fi	iorida Statute	š.			
SIGNATURE Signature typed or printed nume of ruge tered agent	and blood perdicable (AIC)	II - Pensioned Arr	ant eignatura requir	red when reinstating) DATE		
12. OFFICERS AND	· · · · · · · · · · · · · · · · · ·	13.	and later to los	ADDITIONS/CHANGES TO OFFICERS AN	ND DIRECTORS IN 12	
TITLE	DELETE	1.1 TITLE			Change Addition	
NAME WARNER, GREGG		1.2 NAME				
STREET ADDRESS 2682 OAKMONT		1.3 STREF	ADDRESS			
CITY-ST-ZIP FORT LAUDERDALE FL 33332		1.4 CITY-	31 - ZIP			
TITLE	DELETE	2.1 TITLE			Change Addition	
NAME		2.2 NAME	İ			
STREET ADDRESS		2.3 STREE	ADDRESS			
City-st-zip		2. 4 CITY -	ST-ZIP			
TITLE	☐ DELET e	3.1 TITL€			Change Addition	
NAME		3.2 NAME				
STREET ADDRESS		3.3 STREE	ADDRESS			
CITY-ST-ZIP		3.4. CITY-	ST-ZIP			
TITLE	☐ DELETE	4.1 TITLE			Change Addition	
NAME		4. 2 NAME				
STREET ADDRESS		4.3 STREE	ADDRESS			
CITY-ST-ZIP		4.4 CITY-	ĺ			
TITLE	DELETE	5.1 TITLE			Change Addition	
NAME		5.2 NAME	ĺ	•		
STREET ADDRESS		5 3 STREE	ADDRESS			
CITY-ST-ZIP		5.4 CITY-		·		
TITLE	☐ DELETE	6.1 TITLE			Change Addition	
NAME		6.2 NAME	ĺ			
STREET ADDRESS			ADDRESS			
CITY-ST-ZIP		6.4 CITY-5	i			

14. Thereby 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 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 on a suitaching with an address.