## 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

P96000085721 (4) DOCUMENT #

LVDB, INC.

## **FILED** Apr 17 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						-{	I I BALIN LIBYDIY	
3401 OCEAN		5258 BROADWAY MALL	·					
	ACH FL 33487	HICKSVILLE NY 11801						
		US				DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified 10/16/1996		1
9 Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number		Applied For
21	ace of Business	26				65-0703599		Not Applicable
Suite. Apt	#, etc.	Suite, Apt. #, etc.						5 Additional
22		27				<b>5.</b> Certificate of Status Desired		Required
City & State	)	City & State				6. Election Campaign Financing	\$5.0	0 May Be
23		28				Trust Fund Contribution Added to Fees		
Zip	Country Zip Cou			ountry  8. This corporation owes or has paid the current year Intangible				
24	25 29 30			Personal Property Tax due June 30. Yes No				
9, Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent 81 Name								
COLSKY, STEVEN A				"	Name			<b>J</b>
	SW 1ST ST, 4TH FL			82	Street Addre	eet Address (P.O. Box Number is Not Acceptable)		
MIAMI FL 33130				83				
				3				
				84	City	FL	85 Z	ip Code
44 Division	to the provinces of Captions 607 050	2 and 607 1509 Storida Statute	o the el		namad sara	aration automita this statement for the purpose of	f chancin	n ite registered
office or re agent I a	egistored agent, or both, in the State m familiar with, and accept the oblig-	of Florida. Such change was a ations of, Section 607.0505, Flo	uthorize rida Stat	d by	the corporation	on's board of directors. I hereby accept the ap	cointment	as registered
SIGNATURE								
				d Age	ni signature require	d when reinstating) DATE	DIDECT	ODC IN 10
12.	OFFICERS AN	D DIRECTORS DELETE	13.	TI E		ADDITIONS/CHANGES TO OFFICERS AN	☐ Chang	
TITLE	Frank, Kenneth F		1.2 NAM				L Dinaire	jertodition
NAME	FORD DOG ADMAN MALL			ADDRESS				
STREET ADDRESS		POVOJELI P. ATV			ADDRESS	•		
CITY-ST-ZIP TITLE	VP	DELETE	1.4 CITY - 2.1 TITLE		1-219		☐ Chanc	e Addition
NAME	FRANK, FRANKLIN L	_ other	2.2 N		İ			,
STREET ADDRESS	TAT D DOG ADWAY SALL				ADDRESS			
CHTY-ST-ZIP	I HOWOURI P NIV				ST-ZIP			
TITLE			311		31-2W		☐ Chang	e Addition
NAME	EDAME OF THE		32 N					
STHEFT ADDRESS	525 B BROADWAY MALL				ADDRESS			
CITY-ST-ZIP	HICKSVILLE NY		3.4. City-					j
TITLE		DELETE	4.1 TITLE				☐ Chang	e Addition
NAME			4. 2 N	IAME				
STREET ADDRESS			4.3 S	TREET	ADDRESS			
CITY-ST-ZIP			4.4 C	ITY-S	T-ZIP			
TITLE		DELETE	5 1 TITLE				☐ Chang	ge Addition
NAME			5 2 NAME					
STREET ADDRESS			5.3 S	TREET	ADDRESS			j
CITY-ST-ZIP			5.4 C	ITY-S	T-ZIP			
TITLE		DELETE	6.1 TI	TLE			Chang	e Addition
NAME			6.2 N	AME				
STREET ADORESS			6.3 S	IREET	ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP				
	earth, that the information amontiod u	ith this filing door not qualify to	y the ex	000	tion stated in 9	Section 119 07(3)(i) Florida Statutes, Lifurther of	artific that	the information

r nereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informatio 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 secute this report as required by Chapter 607, Florida Statutes; and that my name appears in Ricck 12 or Ricck 13 if changed or on an attachment-with an address. officer or director of the corporation or the receiver or trustee empowered to Block 12 or Block 13 if changed, or on an attachment with an address