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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE.

Sandra 2. Mortisam

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000087792 (3)

LORENZO'S FAMILY CORP.

Principal Place of Business

1043 N.W. 32ND PLACE

appears in Block 12 or Block 13 if cha

SIGNATURE:

Mailing Address

1043 N.W. 32ND-PLACE MIAMI-PL 33125-3941

FILED Apr 25 1997 8:00am Secretary of State



03/10/97 (305) 8050924

MIAMPTE 33125		MIAMITE 33123-3841	·				
				3. Date Incorporated or Qualification 10/21/1996	ed 3a. Date	of Last Re	port
2. Principal Place of Bus	ST.	2a. Mailing Address 26 /627 NU	12 ST.	4. FEI Number 65-0723	860	· · · · · · · · · · · · · · · · ·	plied For t Applicable
S⊍le, Apt.#, etc. 2		Surte, Apt. #, etc.		5. Certificate of Status Desired		8.75 A Fee Re	
City State	A.	City & State	i Fi	6. Election Campaign Financing	⁹ П	\$5.00	
700013	Country	28 ZH2 2	Country) C N	Trust Fund Contribution 8. This corporation has liability		Added to	
4 33/25	25 USA	11	10 USA	Florida Statutes	Yes 1	No	
	e and Address of Current	Registered Agent	81 Name -	10. Name and Address of New	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	
- LORENZO, FR	IANCISCO A	NW2 ST.	\	A weishar	rosen:	<u> </u>	
- MIAMI FL 331	N uterue 1621	NW 2 31.	82 Street Addr	ress (P.O. Box Number is Not Acce	ptable)		
· MIAMI FL 331	20		83 313	C EI SI III IO	7.7		
			94 (20)		1,	el Zin (~~do
			84 City H	HRBAARI	FL I	3	6/ <i>0</i> 6
11. Pursuant to the prov	isions of Sections 607.0502	and 607.1508, Florida Statutes	s, the above-named corp	poration submits this statement for t	he purpose of ch	anging its	s registered
office or registered a agent if ani familiar s	agent, or both, in the State o with, and accept the obligat	r Florida. Such change was au ions of, Section 607.0505, Flor	ithorized by the corporati ida Statutes.	tion's board of directors. I hereby a	reahr ma abboin	iment as	registered
SIGNATURE							
	of or product name of registered agent OFFICERS AND		Rogistered Agent signature require 13.	red when reinstating) ADDITIONS/CHANGES TO O	DATE FEICERS AND D	BECTOR	S IN 12
12. Title MICE	743016339	DELETE	13. 11 TOLE	ADDITIONS/CHANGES TO O		Change	Addition
	icisco 6 Loir	-	1.2 NAME				
SIRBIADORESS 518 E	PI 79A 72 15	CPCO	13 STREET ADDRESS				
	EAH FL 330	13	1.4 CITY-ST-ZIP				
	DUATE	☐ DELETE	2.1 TITLE	The state of the s	Ţ	Change	Addition
NAME HIRA	IDYS MAYO		22 NAME				
	PI TAR 7215	_	23 STREET ADDRESS				
CHY ST ZIP HIAL	EAH EL BBO		2.4 CITY-ST-ZIP			1 0	
THLE		DELETE	3.1 TITLE		L	Change	Addition
NAME			3.2 NAME				
STREET ACOURESS			3.3 STREET ADORESS				
CITY-ST ZIP		DELETE	3.4. CITY-ST-ZIP			Change	Addition
THE			4.1 TITLE 4. 2 NAME		L) Gridnige	L. Radillon
NAMI:			4. 2 NAME 4.3 STREET ADORESS				
STREET ADDRESS			4.4 City-St-2iP				
CHY ST-7P		☐ DELETE	5.1 TITLE			Change	Addition
NAME.		<u> </u>	5.2 NAME			-	
STREET ADDRESS			5.3 STREET ADDRESS				
CRY-ST-ZP			5.4 CITY - \$1 - ZIP				
Tillet		DELETE	6.1 TITLE		Г	Change	Addition
NAMe			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
			6.4 CITY-ST-ZIP				
CIFY - ST- 70°	_			d in Section 119.07(3)(i), Florida Sta t my signature shall have the same at as required by Chapter 607, Flori			