

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

FILED
Mar 06 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000087792 (3)
 1. Corporation Name
LORENZO'S FAMILY CORP.



Principal Place of Business 1627 N.W. 2 ST MIAMI FL 33125 US	Mailing Address 1627 N.W. 2 ST. MIAMI FL 33125 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 S18 E 21 ST Suite, Apt. #, etc. 22 # 19 City & State 23 HIALEAH Zip 24 FL 33013 Country 25 USA	2a. Mailing Address 26 PO BOX 3757 Suite, Apt. #, etc. 27 City & State 28 HIALEAH FL Zip 29 33013 Country 30 USA	3. Date Incorporated or Qualified 10/21/1996	4. FEI Number 65-0723860 Applied For Not Applicable	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No
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g. Name and Address of Current Registered Agent
LORENZO, FRANCISCO A
518 E. 21 ST.
ATP. 19
HIALEAH FL 33013

10. Name and Address of New Registered Agent
 81 Name **FRANCISCO G LORENZO**
 82 Street Address (P.O. Box Number is Not Acceptable)
S18 E 21 ST #19
 83
 84 City **HIALEAH** FL 85 Zip Code **33013**

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, or 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE **FRANCISCO G LORENZO** (NOTE: Registered Agent's signature required when reinstating) DATE **3/15/98**

12. OFFICERS AND DIRECTORS

TITLE	VP	<input type="checkbox"/> DELETE
NAME	LORENZO, FRANCISCO G	
STREET ADDRESS	518 E 21 ST., APT. 19	
CITY-ST-ZIP	HIALEAH FL	
TITLE	AD	<input type="checkbox"/> DELETE
NAME	MAYO, HIRADYS	
STREET ADDRESS	518 21 ST, APT. 19	
CITY-ST-ZIP	HIALEAH FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	FRANCISCO A. LORENZO	
1.3 STREET ADDRESS	1650 NW 2ST	
1.4 CITY-ST-ZIP	MIAMI FL 33125	
2.1 TITLE	AD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	MIRADYS LORENZO	
2.3 STREET ADDRESS	518 E 21 ST #19	
2.4 CITY-ST-ZIP	HIALEAH FL 33013	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I hereby 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 an attachment with an address.

SIGNATURE: **Francisco G Lorenzo** 03/15/98 (205) 863 0104

CR2E034 (10/97)