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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000090793 (6)

LARO SYSTEMS, INC.

Principal Place of Business

Mailing Address

STE. 4. 1800 N. FEDERAL HWY. BOYNTON BEACH FL 33435 STE. 4, 1800 N. FEDERAL HWY. BOYNTON BEACH FL 33435-2811

## FILED Jun 06 1997 8:00am Secretary of State



			<b>y</b>			·•• · · · ·		-	3. Date Incorporated or Qualified 11/05/1996	3a. Da	le of Last	Report	
Principal Place of Business  21  Suite, Apt. #, etc.			2a. Mailing Address 25 Suite, Apt. #, etc.						4. FEI Number 65-0709662		h—	Applied For	
									03-0107001			Vot Applicabl	
22	. 010.		27						5. Certificate of Status Desired S8.75 Additional Fee Required				
City & State			City & State						6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip 24	Country Zip C 25 29 30					Country			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No				
	g, Name and Addre	ss of Current F	legistered Ag	ent					10. Name and Address of New Re	gistered A	gent		
FILING	GS, INC.					81	Name						
3732 N.W. 16TH STREET FT. LAUDERDALE FL 33311-4132						B2	,						
						83			•				
·						84	City		<u> </u>	FL	85 Zip	Code	
office or rec	the provisions of Sec gistered agent, or both familiar with, and acc	<ol> <li>in the State of</li> </ol>	Florida, Such	change was	authorized	by	the corpo	orpora	ation submits this statement for the part of directors. I hereby acce	ouroose of	changing pintment a	its registered is registered	
SIGNATURE	gnature, typed or printed name	e of registered agent a	nd title if applicable	(NO	It: Rogistered	l Age	nt signature re	auired v	when roinstating)	DATE			
12.		FFICERS AND D		· · · · · · · · · · · · · · · · · · ·	13.		<del></del>	<u> </u>	ADDITIONS/CHANGES TO OFFIC	CERS AND	DIRECTO	DRS IN 12	
TITLE	D		[	DELFITE	1.1 TIJ	LF					Change		
NAME	Martini, K.				1.2 NA	MŁ							
	STE. 4, 1600 N. FI				1.3 ST	REET	ADDRESS						
CITY-ST-ZIP	<b>BOYNTON BEACH</b>	FL 33435			1.4 CH	Y-51	1 - ZIP						
TITLE				DELETE	2.1 1(1	LF					Change	Addition	
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NAME			_		52 NA		1						
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NAME					6.2 NA	ME							
STREET ADDRESS					6.3 STF	REE1.	ADORESS						
CITY-ST-ZIP					6 4 CI1	Y-S	7-ZIP						
Information I am an office	indicated on this annu	ual report or sup corporation or the dichanged, or or	plemental ann e receiver or tr i an atlachmer	ual report is t ustee empoy	true and a vered to ead dress.	ccu xeci	irate and the uter this rep	hat my	Section 119.07(3)(i), Florida Statute signature shall have the same legs s required by Chapter 607, Florida S	al effect as Statutes; an	if made u d that my	inder oath; thi r name	