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Apr 18 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000096064 (6)

1. Corporation Name
LINALLISON INC.

Principal Place of Business
608 S. RIVERSIDE DRIVE
POMPANO BEACH FL 33062

Mailing Address
608 S. RIVERSIDE DRIVE
POMPANO BEACH FL 33062-6218



3. Date Incorporated or Qualified
11/20/1996

3a. Date of Last Report
NEW CORP.

4. FEI Number
65-0711388

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21 5326 N.W. 66TH AVE
Suite, Apt. #, etc.

2a. Mailing Address

26 5326 N.W. 66TH AVE
Suite, Apt. #, etc.

22 City & State

23 CORAL SPRINGS, FL

24 33067
Zip

Country

25 BROWARD

27 City & State

28 CORAL SPRINGS, FL

29 33067
Zip

Country

30 BROWARD

9. Name and Address of Current Registered Agent

WARMAN, SHEILA L
608 S. RIVERSIDE DRIVE
POMPANO BEACH FL 33062

10. Name and Address of New Registered Agent

81 Name WARMAN SHEILA L

82 Street Address (P.O. Box Number is Not Applicable)
5326 N.W. 66TH AVE

83

84 City CORAL SPRINGS FL

85 Zip Code 33067

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 *Sheila Warman*
Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE PRESIDENT ☐ DELETE
NAME SHEILA L. WARMAN
STREET ADDRESS 5326 N.W. 66TH AVE
CITY-ST-ZIP CORAL SPRINGS, FL 33067

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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: *Sheila Warman*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/12/97
Date

346-4178
Daytime Phone # 0002153

CR2E034 (9/96)