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Apr 23, 1999 8:00 am
Secretary of State

04-23-1999 90254 044 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000096705

1. Corporation Name
LOAC CORP.

Principal Place of Business

5417 NW 82ND AVE.
MIAMI FL 33166
US

Mailing Address

5417 NW 82ND AVE.
MIAMI FL 33166
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/27/1996

4. FEI Number

65-0760102

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐

Yes ☐ No

9. Name and Address of Current Registered Agent

LINGNER, GILMAR
8620 NW 64TH ST
BAY #13
MIAMI FL 33166

SEE BOX 10 FOR
CORRECT SPELLING
AND CURRENT ADDRESS

10. Name and Address of New Registered Agent

81 Name LINDNER, GILMAR

82 Street Address (P.O. Box Number is Not Acceptable)

5417 NW 82 AVE

83

84 City MIAMI

FL

85 Zip Code 33166

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

Gilmar Lindner - GILMAR LINDNER

01-19-99

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME LINDNER, GILMAR
STREET ADDRESS 8620 NW 64TH ST BAY 13
CITY-ST-ZIP MIAMI FL 33166 ☐ DELETE

TITLE VD
NAME BRANCO, JOSE M
STREET ADDRESS 8620 NW 64TH ST BAY 13
CITY-ST-ZIP MIAMI FL 33166 ☐ DELETE

TITLE VD
NAME LINDNER, GILMAR
STREET ADDRESS 6501 N.W. 36TH STREET, SUITE 305
CITY-ST-ZIP MIAMI FL 33166 ☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P ☒ Change ☐ Addition
1.2 NAME LINDNER, GILMAR
1.3 STREET ADDRESS 5417 N.W 82 AVE
1.4 CITY-ST-ZIP MIAMI FL 33166

2.1 TITLE V ☒ Change ☐ Addition
2.2 NAME BRANCO, JOSE M
2.3 STREET ADDRESS 5417 N.W 82 AVE
2.4 CITY-ST-ZIP MIAMI, FL 33166

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 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, with all other like empowered.

SIGNATURE

Gilmar Lindner
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

04-21-99 305.436.5385

CR2E034 (11/98)