

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # P96000098099
1. Corporation Name

L & R ENTERPRISES, INC.

Principal Place of Business

Mailing Address

325 MEARS BLVD.
OLDSMAR, FL 34677

325 MEARS BLVD.
OLDSMAR, FL 34677

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.
22 City & State
23 Zip Country
24

26 Suite, Apt. #, etc.
27 City & State
28 Zip Country
29

9. Name and Address of Current Registered Agent

P
ROBERT W. LUETH
295 FLORIDA AVE.
CRYSTAL BEACH, FL 34681

81 Name

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

83

84 City

FL 85 Zip Code

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

Signature, typed or printed name of registered agent and filed application

(NOTE: Registered Agent signature required with filing)

DATE 4/13/99

12. OFFICERS AND DIRECTORS

TITLE	P	[] DELETE
NAME	ROBERT W. LUETH	
STREET ADDRESS	295 FLORIDA AVE.	
CITY-ST-ZIP	CRYSTAL BEACH, FL 34681	
TITLE	VP	[] DELETE
NAME	MICHAEL W. RENDE	
STREET ADDRESS	401 FAIRVIEW RD.	
CITY-ST-ZIP	BELLEAIR, FL 34616	
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

14 TITLE	[] Change [] Addition
15 NAME	
16 STREET ADDRESS	
17 CITY-ST-ZIP	
18 TITLE	
19 NAME	
20 STREET ADDRESS	
21 CITY-ST-ZIP	
22 TITLE	
23 NAME	
24 STREET ADDRESS	
25 CITY-ST-ZIP	
26 TITLE	
27 NAME	
28 STREET ADDRESS	
29 CITY-ST-ZIP	
30 TITLE	
31 NAME	
32 STREET ADDRESS	
33 CITY-ST-ZIP	
34 TITLE	
35 NAME	
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38 TITLE	
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50 TITLE	
51 NAME	
52 STREET ADDRESS	
53 CITY-ST-ZIP	
54 TITLE	
55 NAME	
56 STREET ADDRESS	
57 CITY-ST-ZIP	
58 TITLE	
59 NAME	
60 STREET ADDRESS	
61 CITY-ST-ZIP	
62 TITLE	
63 NAME	
64 STREET ADDRESS	
65 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert W. Lueth Robert W. Lueth 4/13/99

(813) 818-9221

99 JUN -2 PM 4:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT 1899
DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
12/02/1996

4. FEI Number
59-3411408

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 owes the current year Intangible
Personal Property Tax. [] Yes [] No

10. Name and Address of New Registered Agent

CR2E034 (11/98)

LS