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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000101574 (7)

LAKE POINTE HOLDINGS, INC.

FILED Apr 21 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					1 20011001 iin saisa biisi dolii Edili dalat stait Edili Isbet diili idele esac took
9095 S.W. 87 AVENUE 9095 S.W. 87 AVENUE					
SUITE 777	1170	SUITE 777			DO NOT WRITE IN THIS SPACE
MIAME FL 33	1170	MIAMI FL 33176			3. Date Incorporated or Qualified
					12/17/1996
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number Applied For
21		26	26		65-0718076 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional
22		27	_ { 		Fee Required
City & State		City & Stato	City & Stato		Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip	Country	Zip	Cour	itry	8. This corporation owes or has paid the current year Intangible
24	25 9. Name and Address of Cur	rent Benistered Apent	30	···	Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
		ion negletore Agent		81 Name	
	TCHELL, JAMES R				
9095 \$.W. 87 AVENUE SUITE 777			82 Street Ac		et Address (P.O. Box Number is Not Acceptable)
MIAMI FL 33176			ŀ	83	
l Mai	AMI FE 33176				
				84 City	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.0	0502 and 607.1508, Florida Statu	tes, the ab	ove-named	ed corporation submits this statement for the purpose of changing its registered
office or f	egistered agent, or both, in the Sta im familiar with, and account the ob-	ate of Florida. Such change was ligations of Section 607,0505. Fl	authorized Iorida Statu	by the cou	orporation's board of directors. I hereby accept the appointment as registered
}	or ranner with, and docope the ob	nginiono or, cocacin con socio, in	onda olar		
SIGNATURE	Signature, typed or printed hame of registered	agent and title if applicable (NO	If Registered	Agent signatur	ture required whon reinstating) DATE
12.	OFFICERS A	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	DELETE	1.1 TIT	LE	Change Addition
NAME MITCHELL, JAMES R			1.2 NA	ME	
STREET ADDRESS 9095 S.W. 87 AVENUE, SUITE 7		JITE 777	1	EET ADDRESS	S (
CITY-ST-ZIP	MIAMI FL 33176	T DOLLETE		Y-ST-ZIP	
TITLE		☐ DELETE	21 111		Change L. Addition
NAME			2.2 NA		
STREET ADDRESS				EET ADDRESS	\$
CITY-ST-ZIP TITLE	ST-ZIP DELETE		2. 4 CH	Y-S1-ZIP	Change Addition
NAME		[] otter	3.1 HI		Contained Contained
, STREET ADDRESS				VIL NEET ADDRESS	
CITY-ST-ZIP				Y-ST-ZIP	
TITLE		DELETE	41 111		☐ Change ☐ Addition
*NAME			4. 2 NA		
STREET ADDRESS			4	ee1 address	s
CITY-ST-ZIP				Y - ST - ZIP	
TITLE		DELETÉ	5.1 Till		Change Addition
NAME			5.2 NA	ME	
STREET ADDRESS			53SIF	EET ADDRESS	s
CITY-ST-ZIP			5.4 CIT	Y-S1-ZIP	
TITLE		☐ DELETE	6.1 1111	ŧ	Change Addition
NAME			6.2 NA	AE.	
STREET ADDRESS			6.3 STF	EET ADDRESS	s
CITY-ST-ZIP			6.4 CIT	Y-ST-ZIP	

14. Thereby 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 logal effect as if made under oath; that I am an officer or director of the corporation or the receiver or truspic empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 3 if changed, or on an attachment with an address.

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