AMENDED

CORPORATION ANNUAL REPORT 1997

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

KEY PUNCH

FILED
Jun 24 1997 8:00am
Secretary of State

DOCUMENT # P96000103910 (1)
Corporation Name

CLA, Inc.

[redacted]

Principal Place of Business	Mailing Address
4853 WEST PROSPECT ROAD FORT LAUDERDALE FL 33309	4850 WEST PROSPECT ROAD FORT LAUDERDALE FL 33309-3048

3. Date Incorporated or Qualified: 12/27/1996	3a. Date of Last Report:
4. FEI Number: 65-0715945	☐ 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	

Principal Place of Business	2a. Mailing Address
Line 1, Apt. #, etc.	26 Suite, Apt. #, etc. 27
City & State	28 City & State
25 Country	29 Zip / 30 Country

9. Name and Address of Current Registered Agent

LEHRER, PAUL R
4850 PROSPECT WEST ROAD
FORT LAUDERDALE FL 33309

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
D ☐ DELETE LEHRER, PAUL R 4850 WEST PROSPECT ROAD FORT LAUDERDALE FL 33309	1.1 TITLE D/P/CEO ☒ Change ☐ Addition 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP
D ☐ DELETE ADLER, MICHAEL M 1400 NW 107TH AVENUE 5TH FLOOR MIAMI FL 33172	2.1 TITLE D/C ☒ Change ☐ Addition 2.2 NAME 200002222182 2.3 STREET ADDRESS -06/25/97--01004--025 2.4 CITY-ST-ZIP ***61.25
☐ DELETE	3.1 TITLE EV/COO ☐ Change ☒ Addition 3.2 NAME Popkin, Gregg 3.3 STREET ADDRESS 4850 W. Prospect Rd. 3.4 CITY-ST-ZIP Fort Lauderdale, FL 33309
☐ DELETE	4.1 TITLE S/T ☐ Change ☒ Addition 4.2 NAME Rodney, Camille F. 4.3 STREET ADDRESS 4850 W. Prospect Rd. 4.4 CITY-ST-ZIP Fort Lauderdale, FL 33309
☐ DELETE	5.1 TITLE AS/AT ☐ Change ☒ Addition 5.2 NAME Levy, Joel 5.3 STREET ADDRESS 1400 NW 107 Ave. 5.4 CITY-ST-ZIP Miami FL 33172
☐ DELETE	6.1 TITLE ☐ Change ☐ Addition 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

DEV #	O/L	VEN #	INV#	BILL/CHG. TO:	AMOUNT
1-207790				Lic. Fee	138.75
2					
# P96000103910 (1)					
DATE PAID	CHECK #	PREPARER	APPVD. BY	TOTAL	138.75
		SW			

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.

SIGN HERE

SIGNATURE: _____ President 6/24/97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date

Secretary 6/19/97

Daytime Phone # 0005301