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 # 1. Corporation Name LAC HOMES, INC. P97000018467 (5)

Mailing Address

FILED Apr 10 1998 8:00am Secretary of State



Principal Place	of business	Walling Address							
6965 CALLE D BOCA RATON			6965 CALLE DEL PAZ BOCA RATON FL 33433						
						DO NOT WRITE	IN THIS S	PACE	
						3. Date Incorporated or Qualified			ļ
						02/27/1997			
2. Principal Pl	ace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number			Applied For
21		26	26			65-0731514			Not Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.					\$8.7	75 Additional
22		27	27			5. Certificate of Status Desired	L.	Fe	e Required
City & State	9	City & State				6. Election Campaign Financing		\$5.	00 May Be
23		28	28			Trust Fund Contribution			ded to Fees
Zip	Country	Zip	Country			8. This corporation owes or has pa	id the curre	ent vea	ır Intangible
24	25	29	30			Personal Property Tax due June 30. Yes No			
		Current Registered Agent	1991			10. Name and Address of New Re		gent	
CU	PELLI, RICHARD			31	Name				
6965 CALLE DEL PAZ									
	CA RATON FL 33433		82 Street Ad			ess (P.O. Box Number is Not Acceptab	10)		
ВО	UK NATUR EL 30400		-	33					
			`						
			[8	34	City		FL	85	Zip Code
				L				Ļ.,	
11. Pursuant t	to the provisions of Sections 6	607.0502 and 607.1508, Florida in State of Florida, Such change	Statutes, the abo	ove- hv t	named corp the corporat	poration submits this statement for the prior's board of directors. Thereby accer	urpose or of the appo	enangi sintmen	ng its registered
agent. I ar	m familiar with, and accept the	e obligations of Section 607.05	05, Florida Statu	tes.		ion's board of directors. I hereby accep	• •		Ů
SIGNATURE									
OIGHT OIL	Signature typed or printed name of regis			Agent	t signature requir	red when reinstating)	DATE		
12.	OFFICE	RS AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC			
TITLE	P	☐ DELE	TE 1.1 TITL	£	1			☐ Cha	nge [_] Addition
NAME	CUPELLI, RICHARD		1.2 NAN	AE.					
STREET ADDRESS	6965 CALLE DEL PAZ		1.3 STR	EE1 A	ADDRESS				
CITY-ST-ZIP	BOCA RATON FL 3343	3	1.4 CITY	r-ST-	- ZIP				
TITLE	V DELETE		TE 2.1 THT L	2.1 TITLE				Cha	nge [_] Addition
NAME	Cupelli, Joseph F		2.2 NA						
STREET ADDRESS	6965 CALLE DEL PAZ		23 STR	2 3 STREET ADDRESS			•		
CITY-ST-ZIP	BOCA RATON FL 3343	3	2. 4 DIT	2. 4 CITY-ST-ZIP					
TITLE		☐ DELE	TE 3.1 TITL	E				Cha	nge Addilion
NAME			3.2 NAN	Æ					
STREET ADDRESS			33 STR	EET A	NDDRESS				
CITY-ST-ZIP			3 4. CIT						
TITLE		DELE			-11			Cha	nge Addition
NAME			. 4 2 NAI						
1					ADDRESS				
STREET ADDRESS					- 1				
CITY-ST-ZIP		DELE	4.4 CITY TE 5.1 TITU		- 2117	<u> </u>	· · · · · · · · · · · · · · · · · · ·	Cha	nge Addition
TITLE		ات بورو						0.10	go La riudicion
NAME			5.2 NAM						
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP		J - 1 - 2-1-	5.4 CITY		- ZIP			05-	ana Addition
TITLE		DELE	TE 6.1 TITL	.E				Cha	nge [] Addition
NAME			6.2 NAM	ИE					
STREET ADDRESS			6.3 STR	EET A	ADDRESS				
CITY-ST-ZIP			6.4 CIT	Y-ST	- ZIP				
						0 11 110 05 (0) (1) EL 11 OL 11 L		477 11 .	

4. 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 eath; that I am an officer or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes, or on an attachment with an address.

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