FILE NOW: FILING FEE AFTER MAY 1ST IS \$5 0.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STA

Sandra B. Mortiam

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000021861 (4)

L. A. E., INC.

FILED May 11 1998 8:00am Secretary of State



Principal Place of Business Mailing Address			-{		
10843 SW 158 LANE 10843 SW 158 LANE					
10843 SW 156 LANE					
				DO NOT WRITE IN TH	IIS SPACE
				3. Date Incorporated or Qualified	
		T		03/03/1997	
├── ` <u>-</u>	Place of Businoss	2a. Mailing Address	070150	4. FEI Number	X Applied For
21 /084		26 P.O. BOX Suite, Apt. #, etc.	970652	65-0738970	Not Applicable
Suite, Apt. #, etc.		27. Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
		City & State		6. Election Campaign Financing	\$5.00 May Be
23 MIA		28 MIAMI	FL.	Trust Fund Contribution	Added to Fees
Zip 24 33/5	Country	Zip 12.10.1	Country	8. This corporation owes or has paid the	/ _ *
24 33/9			w USA	Personal Property Tax due June 30.	Yes X No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent EDANIC LAUDENCE 81 Name					
PALMER PALMER AND MANGIERD PA					
10043 547 136 CARE 82 Street Address (ress (P.O. Box Number is Not Acceptable)	1.24
MIAMI FL 33157 12790 SOUTH DIXIE HWY					
			84 City	E Para l	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 William m. with my ESR.					
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes William M. Wittingw. ESR,					
SIGNATURE CILL AN CIGHT GO. Ser. Ser Ser FIRM PARMER PRIMER & M ANGINED PA 4/30/98 Signature, lyced or presend nasterial requires admit sind entity files (NOTE Registered Agent signature required when renstating) DATE DATE					
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE		Change Addition
NAME	EBANKS, LAURENCE		1.2 NAME		
STREET ADDRESS	P.O. BOX 970652		1.3 STREET ADORESS		
CITY-ST-ZIP	MIAMI FL 33197		1.4 CITY-ST-ZIP		
TITLE		☐ DELETE	2.1 TITLE		Change Addition
NAME			2 2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2.4 CITY+ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME	ļ		3.2 NAME		ļ
STREET ADDRESS	l		3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY+ST-ZIP		
TITLE	İ	☐ DELETE	4 1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS	•	
CITY - ST - ZIP		T acces	4.4 CITY - ST - ZIP		Observa Fileson
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			54 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	<u> </u>		6.4 CITY-ST-ZIP	Control of the contro	

indicated on this annual report or supplied with this ming 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.

SIGNATURE:

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