| COR   | <b>ŇOW: FILING F</b><br>PROFIT<br>PORATION<br>IAL REPORT<br><b>1999</b>   |   | FLORIDA DEPAR<br>Katherin<br>Secretary  | TMENT OF STATE   | FIL<br>Apr 29, 19<br>Secretary<br>04-29-1999 9024   | ED<br>99 8:00 am<br>of State<br>7 004 ***150.00   |
|---|---|---|---|--|---|---|
| . Corporation   | MENT # <b>P97</b><br>Name<br>LW HOLDINGS, INC   |   | 3438  |  |   | KATAR TINGK TINT OFFIC TING TOT FOU   |
|   |   |   |   |  |   |   |
| Principal Place<br>XX NW 107TH<br>IAMI FL 33172   | AVE   | 760   | ailing Address<br>) NW 107TH AVE<br>AMI FL 33172  |  | DO NOT WRITE IN   | THIS SPACE  |
| S   |   | 03  |   |  | 3. Date Incorporated or Qualifed  |   |
| Principal Pl  | ace of Business   | 2a.   | Mailing Address   |  | 03/10/1997<br>4. FEI Number   | Applied For   |
| Suite, Apt. :   | # otc   | 26  | Suite, Apt. #, etc.   |  | 65-0745506  | Not Applicable<br>\$8.75 Additional   |
| FLITE   | 300   | 27  | SUITE 3   | 20   | 5. Certifcate of Status Desired   | Fee Required  |
| City & State  | <b>a</b>  | 28  | City & State  |  | 6. Election Campaign Financing<br>Trust Fund Contribution   | \$5.00 May Be<br>Added to Fees  |
| Zip   | Country<br>[25]   | 29  | Zip   | Country<br>30  | <ol> <li>This corporation owes the current year<br/>Personal Property Tax.</li> </ol>               | ar Intangible   |
| ·   | 9. Name and Address   |   | stered Agent  | 81 Name  | 10. Name and Address of New Registe   | ered Agent  |
|   | N, SHELLY   |   |   |  | dress (P.O. Box Number is Not Acceptable)   |   |
| - + -   | NW 107TH AVE<br>AI FL 33172   |   |   | 83   |   |   |
| 1714-01   |   |   |   | 100  |   |   |
|   |   |   |   | 84 City  |   | 85 Zip Code   |
|   |   | - 607 0500 and 6  | 07 4509 Florida Statut  | 84 City  | moration submits this statement for the nurno   | FL  |
| office or n   | to the provisions of Section<br>egistered agent, or both, in<br>m familiar with, and accept   | the State of Flori  | da. Such change was al  | es, the above-named cou  | rporation submits this statement for the purpor<br>tion's board of directors. I hereby accept the a | FL  |
| office or n<br>agent. I a<br>SIGNATURE  | egistered agent, or both, in<br>m familiar with, and accept   | the State of Flore<br>the obligations of  | da, Such change was an<br>, Section 607.0505, Flor  | es, the above-named co<br>uthorized by the corpora<br>rida Statutes.   |   | FL<br>se of changing its registered<br>appointment as registered  |
| office or n<br>agent. I a<br>SIGNATURE  | egistered agent, or both, in<br>m familiar with, and accept<br>Signature, typed or printed name of n<br>OFF   | the State of Flore<br>the obligations of  | da, Such change was a<br>, Section 607.0505, Flor<br>If applicable. (NOTE:<br>ECTORS  | es, the above-named co<br>uthorized by the corpora<br>rida Statutes.<br>Registered Agent signature requ<br>13.   |   | FL  |
| office or n<br>agent. I a<br>SIGNATURE<br>12.   | egistered agent, or both, in<br>m familiar with, and accept<br>Signature, typed or printed name of r<br>OFFI  | the State of Florid<br>the obligations of<br>egistered agent and title                  | da. Such change was an<br>, Section 607.0505, Flor<br>If applicable. (NOTE:   | es, the above-named co<br>uthorized by the corpora<br>rida Statutes.<br>Registered Agent signature requined<br>13.   | ired when reinstating)  | FL  |
| office or n<br>agent. I a<br>SIGNATURE<br>12.<br>III.   | egistered agent, or both, in<br>m familiar with, and accept<br>Signature, typed or printed name of r<br>OFFI<br>D<br>MILLER, LEONARD  | the State of Florid<br>the obligations of<br>egistered agent and title                  | da, Such change was a<br>, Section 607.0505, Flor<br>If applicable. (NOTE:<br>ECTORS  | es, the above-named co<br>uthorized by the corpora<br>rida Statutes.<br>Registered Agent signature requ<br>13.   | ired when reinstating)  | FL  |
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| office or n<br>agent. I a<br>SIGNATURE<br>12.<br>ITLE<br>IAME<br>ITREET ADDRESS   | egistered agent, or both, in<br>m familiar with, and accept<br>Signature. typed or printed name of r<br>OFFI<br>D<br>MILLER, LEONARD<br>700 N.W. 107TH AVE.<br>MIAMI FL 33172<br>P  | the State of Flori<br>the obligations of<br>egislered agent and title<br>ICERS AND DIRE | da, Such change was a<br>, Section 607.0505, Flor<br>If applicable. (NOTE:<br>ECTORS  | es, the above-named co<br>uthorized by the corpora-<br>rida Statutes.<br>Registered Agent signature requ<br>13.<br>1.1 TITLE<br>1.2 NAME<br>1.3 STREET ADDRESS<br>1.4 CITY-ST-ZIP<br>2.1 TITLE   | ired when reinstating)  | FL  |
| office or n<br>agent.   a<br>SIGNATURE<br>2.<br>ITLE<br>AME<br>TREET ADDRESS<br>ITY-ST-ZIP<br>ITLE<br>AME   | egistered agent, or both, in<br>m familiar with, and accept<br>Signature, typed or printed name of r<br>OFFI<br>D<br>MILLER, LEONARD<br>700 N.W. 107TH AVE.<br>MIAMI FL 33172<br>P<br>KRASNOFF, JEFFREY   | the State of Flori<br>the obligations of<br>egislered agent and title<br>ICERS AND DIRE | da. Such change was a<br>, Section 607.0505, Flor<br>If applicable. (NOTE:<br>ECTORS  | es, the above-named co<br>uthorized by the corpora-<br>rida Statutes.<br>Registered Agent signature requ<br>13.<br>1.1 TITLE<br>1.2 NAME<br>1.3 STREET ADDRESS<br>1.4 CITY-ST-ZIP<br>2.1 TITLE<br>2.2 NAME   | ADDITIONS/CHANGES TO OFFICER  | FL  |
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