

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
 AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Aug 05 1998 8:00am
 Secretary of State

PROFIT CORPORATION
 ANNUAL REPORT
 1998



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

DOCUMENT # P97000023447 (0)

1. Corporation Name
 LNPV HOLDINGS, INC.



Principal Place of Business

760 NW 107 AVENUE
 MIAMI FL 33172

Mailing Address

760 NW 107 AVENUE
 MIAMI FL 33172

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/10/1997

4. FEI Number

65-0745508

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 owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25

29

30

9. Name and Address of Current Registered Agent

RUBIN, SHELLY
 760 NW 107 AVENUE
 MIAMI FL 33172

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

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
 NAME MILLER, LEONARD DELETE
 STREET ADDRESS 700 N.W. 107TH AVE.
 CITY-ST-ZIP MIAMI FL 33172

TITLE D
 NAME BOLOTIN, IRVING DELETE
 STREET ADDRESS 700 N.W. 107TH AVE.
 CITY-ST-ZIP MIAMI FL 33172

TITLE D
 NAME COLE, ROBERT B DELETE
 STREET ADDRESS 700 N.W. 107TH AVE.
 CITY-ST-ZIP MIAMI FL 33172

TITLE D
 NAME PEKOR, ALLAN J DELETE
 STREET ADDRESS 700 N.W. 107TH AVE.
 CITY-ST-ZIP MIAMI FL 33172

TITLE D
 NAME MILLER, STUART A DELETE
 STREET ADDRESS 700 N.W. 107TH AVE.
 CITY-ST-ZIP MIAMI FL 33172

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition
 1.2 NAME
 1.3 STREET ADDRESS
 1.4 CITY-ST-ZIP

2.1 TITLE VP Change Addition
 2.2 NAME Rubin, Shelly
 2.3 STREET ADDRESS 760 NW 107 AVE
 2.4 CITY-ST-ZIP Miami FL 33172

3.1 TITLE P Change Addition
 3.2 NAME Krasnoff, Joffrey P.
 3.3 STREET ADDRESS 760 N W 107 AVE
 3.4 CITY-ST-ZIP MIAMI FL 33172

4.1 TITLE AS Change Addition
 4.2 NAME mc mickle, J.T.
 4.3 STREET ADDRESS 760 NW 107 AVE
 4.4 CITY-ST-ZIP MIAMI FL 33172

5.1 TITLE Change Addition
 5.2 NAME
 5.3 STREET ADDRESS
 5.4 CITY-ST-ZIP

6.1 TITLE Change Addition
 6.2 NAME
 6.3 STREET ADDRESS
 6.4 CITY-ST-ZIP

14. 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.

SIGNATURE:

J.T. Mickle

J.T. Mickle 7/24/98 305/485-2000

CR2E034 (5/98)