FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT** 1998 DOCUMENT # P97
1. Corporation Name
RONALD E. LEMPICKI, INC.

SIGNATURE:



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P97000028030 (9)

FILED Apr 07 1998 8:00am Secretary of State

| _ | | | |) 1884 (1886 1886 1886 1886 1886 1886 1886 1886 1886 1886 1886 1886 1886 1886 1886 | |
|-------------------------------------|--|--|--|--|--|
| Principal Place | of Business | Mailing Address | | 1 1881/001 (18 1811) (881) 641/1 681/1 881/1 981/1 189/1 189/1 481/1 481/1 681/1 189/1 | |
| 3201 SW 117TH AVE DAVIE FL 33330 | | 3201 SW 117TH AVE | | DO NOT WRITE IN THIS SPACE | |
| | | DAVIE FL 33330 | | | |
| | | | | 3. Date Incorporated or Qualified | |
| | | | | 03/20/1997 | |
| 2. Principal Pl | ace of Business | 2a. Mailing Address | | A FEI Number | |
| 21 | | 26 | | 65 - 074060Y Not Applicable | |
| Suite, Apt. #, etc | | Suite, Apt. #, etc. | | 5. Certificate of Status Desired \$8.75 Additional | |
| 22 | | [27] | | Fee Required | |
| City & State |) | City & State | | 6. Election Campaign Financing \$5.00 May Be | |
| Zip | Country | 28 Zip | Country | Trust Fund Contribution Added to Fees | |
| 24 | 25 | h | 0001111 | 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. | |
| | 9. Name and Address of Cui | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | 10. Name and Address of New Registered Agent | |
| LEN | IPICKI, RONALD E | | 81 Name | | |
| 3201 SW 117TH AVE | | | 82 Street Add | dress (P.O. Box Number is Not Acceptable) | |
| DAVIE FL 33330 | | | Siledi Aud | riess (r.o. box Northoer is Not Acceptable) | |
| | | | 83 | | |
| | | | 84 City | 85 Zip Code | |
| | | | OH City | FL S Z P COOK | |
| SIGNATURE | Signature, typicd or printed name of registing | alignations of, Section 607.0505, Flori agent and fill of apply able (NOTE AND DIRECTORS | ida Statulos. Registered Agent signature requ | ured when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
| TITLE | DPST | DELETE | 1.1 TITLE | Change Addition | |
| NAME | Lempicki, ronald e | | 1.2 NAME | | |
| STREET ADDRESS | 3201 SW 117TH AVE | | 1.3 STREET ADDRESS | | |
| CITY-ST-ZIP | DAVIE FL 33330 | | 14 CITY-SY-ZIP | | |
| TITLE | | ∭ DET€1€ | 21 TITLE | L Change Addition | |
| NAME | | | 2.2 NAME | | |
| STREET ADDRESS | | | 2.3 STREET ADDRESS | | |
| CITY-S1-ZiP | | Double | 2. 4 CITY - ST - ZIP | | |
| TITLE | | ☐ DELETE | 3.1 T(TLE | ☐ Change ☐ Addition | |
| NAME | | | 3.2 NAME | | |
| STREET ADDRESS | | | 3.3 STREET ADDRESS | | |
| CITY-ST-ZIP TITLE | | DELETE | 3.4. CITY-ST-ZIP | ☐ Change ☐ Addition | |
| NAME | | L. Milli | 4.1 ITTLE | | |
| STREET ADDRESS | | | 4.2 NAME 4.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 4.3 STREET ADDRESS | | |
| TITLE | | ☐ DELETE | 5.1 TITLE | ☐ Change ☐ Addition | |
| NAME | | _ | 52 NAME | | |
| STREET ADDRESS | | | 5 3 STREET ADDRESS | | |
| CITY - ST - ZIP | | | 5.4 CHTY-ST-ZIP | | |
| TITLE | | DELETE | 6.1 TIPLE | Change Addition | |
| NAME | | | 6.2 NAME | | |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 6 4 CITY - ST - ZIP | | |
| 14. I hereby c | ertify that the information supplied | with this filing does not quality for | the exemption stated in | Section 119.07(3)(i), Florida Statutes. I further certify that the information ure shall have the same legal effect as if made under oath; that I am an united by Chapter 67. Florida Statutes; and that my name energy is | |