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 # P97000032096 (4)

LAKE WORTH LOAN & JEWELRY, INC.

FILED May 12 1998 8:00am Secretary of State

a amangani san amang antaki mang manga manga mang angga angga angga bahin dalah dalah dalah sang angga angga a

Principal Place of Business Mailing Address					4 10011001 110 15111 18011 00111 80111 00111 00111	tite terti-Abten batie arte eder	
111 N. DIXIE HIGHWAY LAKE WORTH FL 33460 LAKE WORTH FL 33460					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified		
					04/07/1997		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For	
21		26			65-075 0381	Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State			City & State		A Flanking Commission Figure in		
23		28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip	Country	Zip	Country	,	8. This corporation owes or has paid the o		
24	25		30		Personal Property Tax due June 30.	Yes No	
<u></u>	9. Name and Address of Curre	int Registered Agent			10. Name and Address of New Registers	d Agent	
SU	ATER, ROBERT W		81	Name		f +	
214 BRAZILIAN AVENUE			62	Street Add	Iress (P.O. Box Number is Not Acceptable)		
SUITE 221							
PALM BEACH FL 33480			83				
			84	City	F		
11. Pursuant to the provisions of Sections 607 0502 and 607.1508, Florida Statutes, the above-namoffice or registered agent, or both, in the State of Florida. Such change was authorized by the agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					poration submits this statement for the purpose	of changing its registered	
Office of r	egistered agent, or boin, in the stat m familiar with, and accept the obli	gations of, Section 607.0505, Flor	ida Statute	y tria corpora S.	mon's board or directors. Thereby accept the a	ppointment as registered	
SIGNATURE							
12.	Signature, typed or printed name of registered a	gent and title if applicable (NOTE: ND DIRECTORS	Registered Ap	ent signature requ	Ired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A		
TITLE	The state of the s		1.1 TITLE		765111011070101110210 10 011 102110 11	Change Addition	
NAME	_		1.2 NAME			-	
STREET ADDRESS			1.3 STREET	ADDRESS			
CiTY - ST - ZIP			1.4 CITY - 5	ST - ZIP			
TITLE			2.1 TITLE			Change Addition	
NAME	2.2		2.2 NAME				
STREET ADDRESS	2.3		2.3 STREET	ADDRESS			
CITY-ST-ZIP			2.4 CITY-	ST-ZIP			
TITLE			3.1 TITLE			Change Addition	
NAME			3.2 NAME				
STREET ADDRESS				ADDRESS			
CITY-ST-ZIP TITLE		DELETE	3.4. CITY- 4.1 TITLE	ST-ZIP		Change Addition	
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET				
CITY-ST-ZIP			4.4 City-5	1			
TITLE		☐ DELETE	5.1 TITLE	-		Change Addition	
NAME			5.2 NAME				
STREET ADDRESS			5 3 STREE	ADDRESS			

14. I hereby certify that the information supplied with indicated on this annual report or supplemental reofficer or director of the corperation or the receive Block 12 or Block 13 if changed, or the all profits at the received by the rec

CITY-ST-ZIP

NAME STREET ADDRESS CITY - ST - ZIP

s filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information ual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

5.4 CITY - ST - ZIP

6.1 TITLE 6.2 NAME

DELETE