## 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

P97000045652 (9) DOCUMENT #

LAPECO CORPORATION

## FILED Mar 25 1998 8:00am Secretary of State



Principal Place of Business Mailing Address FREDERICK C. THACHER, 9750 SEMNOLE BY STE SEMINOLE, FL- 33772 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/20/1997 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 2₿ Trust Fund Contribution Added to Fees Zip Country Country This corporation owes or has paid the current year Intangible 25 30 Personal Property Tax due June 30. ☐ Yes 24 29 g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent FREDERICK C. THACHER CPA, PA. 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 9750 SEMINDLE BV. SHITE! 83 SEMINOLE, FL. 33772 84 City 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 of buth, in the State of Florida, Such changing 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 607.0906, Florida Segutes. required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE \_\_\_ Addition Change TITLE D 1.1 TITLE NAME KRYSTEK, ZYGMUNT 1.2 NAME 6121 BAHIA DEL MAR BLVD. STREET ADDRESS 1.3 STREET ADDRESS **\$T PETERSBURG FL 33715** 1.4 CITY - ST - 7IP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE KRYSTEK, REGINA 2.2 NAME NAME 6121 BAHIA DEL MAR BLVD. 2.3 STREET ADDRESS STREET ADDRESS ST PETERSBURG FL 33715 City-ST-ZIP 2. 4 CITY - ST-ZIP DELETE ☐ Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 4.4 CITY - ST - ZIP DELETE Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 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. £. ₹.9°