

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **P97000060695**

1. Corporation Name

**LATOR INTERNATIONAL, INC.**

**FILED**  
**Sep 16, 1999 8:00 am**  
**Secretary of State**

09-16-1999 90006 010 \*\*\*550.00



Principal Place of Business

7777 GLADES ROAD  
SUITE 211  
BOCA RATON FL 33433

Mailing Address

7777 GLADES ROAD  
SUITE 211  
BOCA RATON FL 33433

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**07/10/1997**

4. FEI Number

**65-0846177**

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 the current year  
Intangible Personal Property. ☐ Yes ☒ No

2. Principal Place of Business

21 **10570 Hagen Ranch Rd**

Suite, Apt. #, etc.

22

City & State

23 **Boynton Bch, FL**

Zip

24 **33437**

Country

25 **USA**

2a. Mailing Address

26 **10570 Hagen Ranch Rd**

Suite, Apt. #, etc.

27

City & State

28 **Boynton Bch, FL**

Zip

29 **33437**

Country

30 **USA**

9. Name and Address of Current Registered Agent

**RUTSTEIN, LAWRENCE**  
7777 GLADES ROAD  
SUITE 211  
BOCA RATON FL 33433

10. Name and Address of New Registered Agent

81 Name

**Robert Claire, Esq**

82 Street Address (P.O. Box Number is Not Acceptable)

**7280 W Palmetto Park Road**

83

City

**BOCA RATON**

FL

85 Zip Code

**33433**

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 **DPST** ☒ DELETE

NAME **RUTSTEIN, LAWRENCE**  
STREET ADDRESS **7777 GLADES ROAD, SUITE 211**  
CITY-ST-ZIP **BOCA RATON FL 33434**

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **DPS** ☐ Change ☒ Addition

1.2 NAME **CRICK DECKINGER**

1.3 STREET ADDRESS **10570 HAGEN RANCH RD**

1.4 CITY-ST-ZIP **BOYNTON BCH, FL 33437**

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

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:

**RECEIVED AGENT**

**9/10/99**

**561.732-4116**

CR2E034 (5/99)

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