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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENTA OF STATE

Secretary of State DIVISION OF CORPORATIONS

P97000060730 (3) DOCUMENT #
1. Corporation Name

LAUVOOR & ASSOCIATES, INC.

FILED Apr 22 1998 8:00am Secretary of State



Trincipa: Fiau	e or positioss	Mailing Address			
128 NORTH DIXIE HIGHWAY HOLLYWOOD FL 33020		128 NORTH DIXIE HIGHW	/AY		
HOLLINOOL	7 FL 33020	HOLLYWOOD FL 33020		DO NOT WRITE IN TH	IC COACE
					IS STAUE
				3. Date Incorporated or Qualified 07/10/1997	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0771551	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			\$8.75 Additional
22		27		6. Certificate of Status Desired	Fee Required
City & Stat	e	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country		
24 .	25	}a `	30	This corporation owes or has paid the Personal Property Tax due June 30.	Yes No
,	9, Name and Address of Cure		30]	10. Name and Address of New Registers	
INCORPORATORS PLUS, INC.					
	14 N UNIVERSITY DRIVE			LIN YOORHIES	
			82 Street Ad	dress (P.O. Box Number is Not Acceptable)	
PLANTATION FL 33322 /28 N. D. XIE					AY
			63	•	′
			84 City /	/	85 Zip Code
			1 1 24	OLLYWOOD F	L 220200
11. Pursuant	to the provisions of Sections 607.0	562 and 607.1508, Florida Statute	s, the above-named co	orporation submits this statement for the purpose alion's board of directors. I hereby accept the a	of changing its registered
office or r	egistered agent, or both, in the Sta im familiar with, and agreent be ob-	ate of Floride, Such change was at ligations of Section 607 0505. Flor	uthorized by the corpor	ation's board of directors. I hereby accept the a	ppointment as registered
		Continue de la contin			17 00
SIGNATURE.	Signature, typed or printed name of registered	agent and title if applicable (NOTE	Registered Agent signature rec	bired when reinstation)	'//-73
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TIFLE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Change Addition
NAME	VOORHIES, OLIN	_	1.2 NAME		
	128 NORTH DIXIE HIGHWA	v			
STREET ADDRESS	HOLLYWOOD FL 33020	11	1.3 STREET ADDRESS		
CITY-ST-ZIP	11012111000112 00020	DELETE	1.4 CITY-ST-ZIP		
TITLE		L DELET€	2.1 TITLE		Change Addition (
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY-ST-ZIP	<u> </u>	
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME	<u> </u> -		4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		ļ
i	`				-
CITY-ST-ZIP TITLE		DELETE	4.4 City-St-ZiP		Change Addition
			5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZiP		
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
14 I hereby o	ertify that the information supplied	with this filing does not qualify for	the exemption stated i	in Section 119.07(3)(i), Florida Statutes. I further	certify that the information
indicated	on this annual report or supplement	ntal annual report is true and accu	rate and that my signat	ture shall have the same legal effect as if made quired by Chapter 607, Florida Statutes; and the	under oath: that I am an
Block 12	or Block 13 if changed, or on an a t	tachment with an address	vecture this report as re	quired by Chapter our, Florida Statutes; and tha	a my name appears in
		- 2		ω . (