

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

FILED
May 05 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000066614 (3)

1. Corporation Name

LDH INTERNATIONAL, INC.

Principal Place of Business

2217 WILTON DRIVE
SUITE 26
FORT LAUDERDALE FL 33305

Mailing Address

2217 WILTON DRIVE
SUITE 26
FORT LAUDERDALE FL 33305

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/01/1997

2. Principal Place of Business

21 2400 LAS OLAS BLVD

Suite, Apt. #, etc.

22 Suite 140

City & State

23 FORT LAUDERDALE, FL

Zip

24 33301

Country

25 US

2a. Mailing Address

26 2400 LAS OLAS BLVD

Suite, Apt. #, etc.

27 Suite 140

City & State

28 FORT LAUDERDALE, FL

Zip

29 33301

Country

30 US

4. FEI Number

65-0771538

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 or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

AMERILAWYER CHARTERED
343 ALMERIA AVENUE
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name

HOPENGARTEN, DANIEL

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

2400 LAS OLAS BLVD

83

Suite 140

84 City

Fort Lauderdale

FL

85 Zip Code

33301

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)

04/28/98

DATE

12. OFFICERS AND DIRECTORS

TITLE PTD ☐ DELETE

NAME HOPENGARTEN, DANIEL
STREET ADDRESS 2217 WILTON DR, STE 26
CITY-ST-ZIP FORT LAUDERDALE FL 33305

TITLE VSD ☐ DELETE

NAME DARWIN, LEA
STREET ADDRESS 2217 WILTON DR, STE 26
CITY-ST-ZIP FORT LAUDERDALE FL 33305

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 PTD ☒ Change ☐ Addition

1.2 NAME HOPENGARTEN, DANIEL

1.3 STREET ADDRESS 2400 LAS OLAS BLVD SUITE 140

1.4 CITY-ST-ZIP FORT LAUDERDALE, FL 33301

2.1 TITLE VSD ☐ Change ☐ Addition

2.2 NAME DARWIN, LEA

2.3 STREET ADDRESS 2400 LAS OLAS BLVD SUITE 140

2.4 CITY-ST-ZIP FORT LAUDERDALE, FL 33301

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP ☐ Change ☐ Addition

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

Signature

HOPENGARTEN, DANIEL

04/28/98

DATE

CR2E034 (10/97)