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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000090067

1. Corporation Name

LAVIE PARTNERSHIP, INC.

FILED Feb 22, 1999 8:00 am Secretary of State

02-22-1999 90081 050 ***150.00



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Principal Plac	e of Business	Mailing Address				i i nk sines	III. 18411 (MAIS BAIL)	88 ()) 86 211 88 114	k rælft mætif æmiri		
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						3. Date Incorpo	rated or Qualife		 _		}
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Principal P	lace of Business	2a. Mailing Address				4. FEI Number				pplied For	1
<u> </u>		26				<u>59-34783</u>	<u> 16 </u>	***		ot Applicable	}
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			i	5. Certifcate of	Status Desired		•	Additional equired	
City & Stat	e	City & State				6Election Cam Trust Fund C		1		May Be ⁻ to Fees	-
Zip	Country	Zip	Cou	ıntry		8. This corporal	ion owes the cu	rrent year In	itangible		l
	25	29	30		i	Personal Pro	perty Tax.		Yes	□No	
	9. Name and Address of Current	Registered Agent				10. Name and A	ddress of New	Registered	Agent		ļ
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	EN, CLARA K			82 Stree	t Addres	s (P.O. Box Num	per is Not Accer	table).			1
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11. Pursuant	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	and 607.1508, Florida Stat	utes, the a	bove-name	d corpor	ation submits this	statement for th	e purpose o	f changing its	registered	1
office or r	egistered agent, or both, in the State of m familiar with, and accept the obligation	Florida. Such change was ons of Section 607.0505. F	authorized Iorida Stat	olby the com Stes.	poration'	s board of directo	rs: 1 hereby acc	ept the appo	intment as re	egistered	(
	1 01 -11	2000	V/	11 0	V	$\Omega 0$.		1-1-	43]
SIGNATURE	Signature, typed or printed name of registered agent a	and title if applicable. (NO	TE. Registered	Agent signature	s required w	then reinstating)		DATE	10		≨ا
12.	OFFICERS AND	DIRECTORS	13.				HANGES TO O	FFICERS A		ORS IN 12	٤
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... 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, with all other like empowered.