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 # P97000101390 1. Corporation Name

LUBE LADY, INC.

Principal Place of Business 4614 CARTHAGE CIRCLE N. LAKE WORTH FL 33463

2. Principal Place of Business ube Suite, Apt.#, etc.

> BROOKSHER, WENDY S 4614 CARTHAGE CIRCLE N. **LAKE WORTH FL 33463**

Pursuant to the provisions of sections 607.0 office or registered agent, or both, in the St agent. I am familiar with, and accept the ob

Signature, typed or printed name of registered :

22

12. TITLE

NAME

NAME

TITLE

NAME

TITLE

NAME

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP TITLE

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP TITLE

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

09-22-1999 90013 017 ***550.00

f Business	Mailing Address							,,
CIRCLE N. 33463	4614 CARTHAGE CI LAKE WORTH FL 3							
						O NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified 12/02/1997			
e of Business	2a. Mailing Address				4. FEI Number		T	Applied For
Ladu Inc.	26				65-0799109		ſ	Not Applicable
511) 39 nd St	Suite, Apt. #, etc	c. ————	Ψ.		5. Certificate of Status Desired		-	.75 Additional ee Required
auderdale FL 28				- 11 .	Election Campaign Financing Trust Fund Contribution			5.00 May Be dded to Fees
Country Zip			ountry		8. This corporation owes the current year			
5 25 U.SA	29	30			Intangible Personal Property.		Yes	∑ №
9. Name and Address of Curren	t Registered Agent				10. Name and Address of New R	egistered A	gent	!
			81	Name				
KSHER, WENDY S			82	Street Add	ress (P.O. Box Number is Not Accepta	hle)		
CARTHAGE CIRCLE N.			02	Sileet Addi	to the second se			
Worth FL 33463		83				•		
			-	0.1			85	Zip Code
			84	City		FL	03	2ip 0008
istered agent, or both, in the State familiar with, and accept the obliga	of Florida. Such change ations of, section 607.05	was authoriz 05, Florida S	zed by tatute:	the corporat	ration submits this statement for the pu on's board of directors. I hereby accep	rpose of cha t the appoint	ingini tmen	g its registered t as registered
nature, typed or printed name of registered agent and title if applicable. (NOTE: OFFICERS AND DIRECTORS				gent signature rec	ired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
D OFFICERS AN		11	S. TITLE	<u> </u>	ADDITIONS/CHANGES TO OFF	TOERS AND		hange Addition
=	L DELE	1E E	NAME	1		L		iainge [] Audidois
BROOKSHER, WENDY S				ADDRESS				
4614 CARTHAGE CIRCLE N.				ADDRESS				
LAKE WORTH FL 33463			CITY-S1	i-ZIP			7.	
D	L DELE	1-	TITLE			L	(1	hange Addition
BROOKSHER, TIMOTHY			NAME					
			STREET	ADDRESS	·		- ~	
LAKE WORTH FL 33463			CITY-S	T-ZIP		· -		
	DELE	TE 3.1	TITLE			L	(1	hange Addition
		3.2	NAME					
		3.3	STREET	ADDRESS				
		3.4	CITY-S	T 71D				

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.

4.1 TITLE

4.2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

OELETE.

DELETE

DELETE

SIGNATURE: Limoth WESTABLE IRE TIMOTHALLING Brooksher

561-968-7383

Change Addition

Change Addition

____ Addition

Change