May 07, 1999 8:00 am Secretary of State

05-07-1999 90123 042 ***150.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P98000073168**1. Corporation Name

LASZLO NAGY INC.

Mailing Address Principal Place of Business

611177 - 90007 - 29



586 3RD ROAD AKE WORTH FL S	13467		186 3RD ROAD IKE WORTH FL 33467				DO NOT WRITE IN	rhis s	PAÇE				
						-	3. Date Incorporated or Qualifed 08/19/1998						
2. Principal Place of Business			2s. Mailing Address			-	4. FEI Number 65-0856764						
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional					
City & State		28	City & State				6. Election Campaign Financing Trust Fund Contribution			.00 May Be ded to Fees			
Zip	Country	29	Zip	Country	1		This corporation owes the current year Personal Property Tax.		Yes	≥5%∘			
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent								
				81	Γ	Name	-						
NAGY, 5586 3	LASLO RD ROAD			82		Street Address	s (P.O. Box Number is Not Acceptable)						
LAKE WORTH FL 33467				83	Ī								
				84	}	City		FL	1 1	Zip Code			
11. Pursuant to	the provisions of Sections 607	.0502 and	607.1508, Florida Statutes, ti	he abov	0-1	named corpora	ation submits this statement for the purpo	se of c	hangir ment	ng its registered as registered			

SIGNATURE	d or printed name of registered agent and site if applicable.	(NOTE: Re	igistered Agent signature i	squired when reinstating)	DATE	
12.	OFFICERS AND DIRECTORS		13,	ADDITIONS/CHANGE	S TO OFFICERS AND DIRECT	
TITLE		DELETE	1.1 TITLE	PRES	Chang	₹ Addition
		,	12 NAME	LASTIC NACTY	_	
CAME			1.3 STREET ADDRESS	5586 3ND NOA	0	
STREET ADDRESS			1.4 CITY-ST-ZIP	LASZLO NAGY 6586 310 10A	1. 33467	
CTTY-51-ZEP		DELETE	2.1 TITLE	,	☐ Chang	Addition
ITILE		-	22 NAME			
WE			2.3 STREET ADDRESS			
STREET ADDRESS			-2:4 CtTY-ST-ZF			
TTY-ST-ZIP		DELETE	3.1 TITLE		☐ Chang	e 🔲 Addition
TILE			32 NAME	l — ·· -		
ME			3.3 STREET ADDRESS			
STREET ADDRESS			34 CITY-ST-ZIP	·		
CITY-ST-ZIP		DELETE	4.1 TITLE		☐ Chang	e Addition
mve .	·		4.2 NAME			
NAME			4.3 STREET ADDRESS			
STREET ADDRESS				!		
XTY-ST-ZP		DELETE	4.4 CITY-ST-ZIP 51 TITLE		Chang	e
M/E		Comerc	52 NAME			
WAE			5.3 STREET ADDRESS		•	
STREET ADDRESS			5.4 CITY-ST-ZIP			
XTY-ST-ZIP		DELETE	61 TITLE		Chang	e Addition
mue			62 NAME			_
NAME				1		
STREET ADORESS			6.3 STREET ADDRESS	1		
			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 trusted impowered 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 affactment with an address, with all other like empowered.