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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90197 030 ***163.75

DOCUMENT # P98000080485

1. Corporation Name

LMML ENTERPRISES, INC.



Principal Place of Business Mailing Address		i idelider va jeret iditt berit detti gatti d	3191 1916 9916 9196 JUNE 1919 3111 1991
6624 GATEWAY AVENUE 6624 GATEWAY AVENUE			
SARASOTA FL 34231 SARASOTA FL 34231		DO NOT WRITE IN TI	HIS SDACE
		3. Date Incorporated or Qualifed	113 SFACE
en en en la granda d'appropria de la granda d		09/17/1998	
Principal Place of Business 2a. Mailing Address		4. FEI Number	Applied For
21 717 NE 36th Ave 26 717 NE 3	6th Ave	65-0863818	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22 OCAIA FI 34470 27		74	Fee Required
City & State City & State	~ i	6. Election Campaign Financing	\$5.00 May Be
	3	Trust Fund Contribution	Added to Fees
Zip Country Zip	Country	8. This corporation owes the current year	
24 25 29 34470	30 MArion	Personal Property Tax.	Yes No
9. Name and Address of Current Registered Agent	81 Name	10. Name and Address of New Register	eo Agent
LEWIS, KURT F	81 Name 2/3/2	Marie Leitch	
		ess (P.O. Box Number is Not Acceptable)	
6624 GATEWAY AVENUE SARASOTA FL 34231		E SOTH C+	
SANASUIA FL 34231	83		ł
	84 City		85 Zip Code
	OCA	<i>9/19</i>	-L 34400
		and a submite this statement for the suppose	of changing its registered
11. Pursuant to the provisions of Sections 697.0502 and 607.1508, Florida Statute	es, the above-named corpo	oration submits this statement for the purpose	pointment as registered
loffice or redistered abent or both/do/the State of Florida. Such change was at	utnonzed by the corboratio	of s board of directors. Thereby accept the ap	pomanent as registered
office or registered agent, or both/prine state of Florida. Such change was a agent, am familiar with, and arcept the obligations of Section 607.0505, Florida.	rida Statutes.	on's board or directors. Thereby accept the ap	ppointment as registered
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14. I hereby certify that the information supplied with this filing does not qualify to 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 for an 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 seceiver 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 attach property and address with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP