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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S44488

(2)

1-	

FILED Mar 03 1998 8:00am Secretary of State

LIVING	IN THE LIGHT, INC.					1	
						T PARTIETO ILLENDIR BIDIT DIPOL COLO CELL BIBLI DI) <u> </u>
Principal Plac	e of Business	Mailing Address				i samidid (11 bibit Bibli Bibat 10111 ibit Gibit Bil	tre dines dines dense minte cante
7135 HARDING AVE 7135 HARDING AVE							
SUITE 135 SUITE 135					DO NOT WRITE IN THIS	PODACE	
MIAMI BEACI	H FL 33141	MIAMI BEACH FL 33141				3. Date Incorporated or Qualified	SPACE
						04/08/1991	
2 Principal P	lace of Business	2a. Mailing Address				4. FEI Number	Applied For
	idos or Bosiness	26				65-0253149	Applied For Not Applicable
Suite, Apt.	#. etc	Suite, Apt. #, etc.					\$8.75 Additional
22		27			5. Certificate of Status Desired	Fee Required	
City & State	θ	City & State				6, Election Campaign Financing	\$5.00 May Be
23	_	28				Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Cou	entry		8. This corporation owes or has paid the cu	
24	25	29	30	•			☐ Yes ☐ No
	9. Name and Address of Current	Registered Agent	1	Γ		10. Name and Address of New Registered	Agent
10	PEZ, LUZ MARIA			B1	Name		
	35 HARDING AVE			82	Street Add	ress (P.O. Box Number is Not Acceptable)	
	DITE 135			62	Street Audi	ess (F.O. Box Number is Not Acceptable)	
	AMI BEACH FL 33141			83			
*****	The section of the se					······································	
				B4	City	FL	85 Zip Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statute	s, the a	bove-	named corp		
office or r	egistered agent, or both, in the State of	of Florida, Such change was a tidee of Section 607 0505. Flor	uthorize rida Stat	d by t	he corporat	poration submits this statement for the purpose of ion's board of directors. I hereby accept the ap	pointment as registered
	XCOOM		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	.0.00.		ala	6l98
SIGNATURE	Signature, typed or printed name of registered agen	it and title if applicable (NOTE	Registere	d Agent	signature requir	ed when reinstating) DATE	<u> </u>
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AN	
TITLE	D	☐ DELET€	1.1 TI	TLE	Į.		Change Addition
NAME	Lopez, Luz Maria		1.2 N/	AME			[2
STREET ADDRESS	7135 HARDING AVE #135		1.3 ST	reet ac	DDRESS		
CITY-ST-ZIP	MIAMI BEACH FL		1.4 CI	TY-ST-	ZIP		. <u></u>
TITLE	D	☐ DELET é	2.1 11	TLE			Change Addition
NAME	SCHMITZ, GLORIA		2.2 N/	AME			
STREET ADDRESS	7135 HARDING AVE #135		2.3 ST	REET AD	ODRESS		
CITY-ST-ZIP	MIAMI BEACH FL	AMI BEACH FL 2.4		ITY-ST-	ZIP		
TITLE		☐ DELETE	3.1 TF				☐ Change ☐ Addition
NAME			3.2 NA				
Street address			3.3 ST	REET AC	odress		
CITY-ST-ZIP			_	tty-st-	ZIP		
ilitte		☐ DELETE	4.1 71	TLE			☐ Change ☐ Addition
NAME			4. 2 N	AME	i		
STREET ADDRESS			4.3 \$1	REET AC	ODRESS		
CITY-ST-ZIP			4.4 CI	TY-ST-	ZIP		
TITLE		☐ DELETE	5.1 TI	TLE			Change Addition
NAME			5.2 NA	\ME			
STREET ADDRESS			5.3 ST	REET AC	odress		}
CITY-ST-ZIP		· <u>= 4</u>	5.4 CITY - 5		ZIP		
TITLE	!	☐ DELETE	6.1 TII	TLE			☐ Change ☐ Addition
NAME			6.2 NA	\ME		•	
STREET ADDRESS			6.3 ST	REET AL	DORESS		
CITY-ST-ZIP			6.4 CI	TY-\$T-	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 13 if changed, or on an attachment with an address.

2/26/98 (305)865-8869