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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # S82201

L. F. MURPHY ENTERPRISES, INC.

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## FILED Apr 10 1997 8:00am Secretary of State

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Principal Place of	Busness	Mailing Address					
7425 S.W. 42ND ST MIAMI FL 33155	τ.	7425 S.W. 42ND ST. MIAMI FL 33155-4402					
				4	3. Date incorporated or Qualified 09/24/1991	3a, Date of 04/17/18	Last Report
2. Princ pal Place	of Business	2a. Mailing Address			4. FEI Number	•	Applied For
21		26			65-0294003		Not Applicable
Suite, Apl. #, el	to.	Suite, Apt #, etc.			5. Certificate of Status Desired		.75 Additional ee Required
City & State		City & State			6. Election Campaign Financing	\$	5.00 May Be
23		28			Trust Fund Contribution		dded to Fees
Zφ	Country	Zip	Countr	1	8. This corporation has liability for in		
24	25	29	30			Yes No	
	), Name and Address of Currer	nt Registered Agent	81	LNama	10. Name and Address of New Reg	Istered Agent	
	Y, LINDA F.		61	Name			
	W. 42 ST.		82	Street Add	fress (P.O. Box Number is Not Acceptabl	e)	
MIAMI F	L 33155		83				
			"				
			84	City		FL 85	Zip Code
ad Discount to the	a provisiona of Castiona CO7 000	32 and 607 1500 Florida St	estudes the above	a-named cor	poration submits this statement for the pu		ging its registered
office or regis	tered agent, or both, in the State	of Florida. Such change w	as authorized b	y the corpora	ation's board of directors. I hereby accep	t the appointm	ent as registered
agent. I am fa	miliar with, and accept the oblig	ations of, Section 607.0505	5, Florida Statute	8. :			
SIGNATURE	nive Typed or printed halps of registered ag	ont and late of sood cable	INOTE: Peoplered &c	ent signature regu	ired when reinstating)	DATE	
12.		ID DIRECTORS	I 13.	ork 4 grazero roqu	ADDITIONS/CHANGES TO OFFIC		ECTORS IN 12
Tille D		DELETE					hange Addition
	URPHY, LINDA F.		1.2 NAME			·	
	425 S.W. 42ND ST.			T ADDRESS			
	IAMI FL		1.4 CITY-	ST-2IP			•
TITLE S		DELETE				□ C	hange Addition
NAME E	STEVEZ, MICHAEL		2.2 NAME				
STREET ADDRESS 74	425 S.W. 42ND ST.		2.3 STREE	T ADDRESS			•
CITY-ST-7IP M	iami fl		2. 4 CITY	ST-ZIP			
TITLE		DELETE	3.1 TITLE				hange
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREE	T ADDRESS			
Car-St-ZP			3.4. CITY-	ST-ZIP			
TILLE	·	☐ DELETE	4.1 TITLE			□ 0	hange [_] Addition
NAME			. 4.2 NAM				
STREET ADDRESS			4.3 STREE	I ADDRESS			
CITY+ST+Z/P	,,		4.4 CITY-	ST-ZIP			
111111		☐ DELETE				□ 0	hange L. Addition
NAME			5.2 NAME	- 1			
STREET ADDRESS				1 ADDRESS			
CITY - ST - ZIF		D Britze	5.4 CITY	ST-ZIP		F1 A	hange Addition
1 11.5		☐ DELETE				<u>.</u>	mange LL Addition
NAME			6.2 NAME				
STREET ADDRESS				T ADDRESS			
City-St-7-	and the state of t	J. 34. R. S. 600 J	6.4 CiTY		nd in Spotion 110 07/2\(\text{i}\) Elorida Statutos	\ liuribar aa⇒	fu that the

4. I do 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.

SIGNATURE:

DITAL F. MUMMY WHEEL OR DIRECTOR

414/97

(305) 266-5920