

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



DEPARTMENT OF REVENUE
Sandra B. Murrin
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

25 FEB 28 PM 4:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE.

DOCUMENT # S94835

(3)

1. Corporation Name

L.P.T. DEVELOPMENT, INC.

Principal Place of Business

6413 CONGRESS AVENUE, @220
BOCA RATON FL 33487

Mailing Address

6413 CONGRESS AVENUE, @220
BOCA RATON FL 33487

3. Date Incorporated or Qualified

11/18/1991

3a. Date of Last Report

03/15/1994

4. FEI Number

65-0299592

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

POPKIN & SHURPIN PA
2499 GLADES RD
SUITE 114
BOCA RATON FL 33431

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(Signature required for all changes of registered agent and for all changes of registered office)

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

VPTA

NAME

HOWELL, MICHAEL J

STREET ADDRESS

120 W. GLADES ROAD

CITY-ST-ZIP

BOCA RATON FL

TITLE

P

NAME

WEINGARTEN, ALLEN

STREET ADDRESS

6413 CONGRESS AVENUE, STE. 220

CITY-ST-ZIP

BOCA RATON FL

TITLE

VPS

NAME

ALBANESE, LEONARD

STREET ADDRESS

551 NW 77TH STREET, STE. 101

CITY-ST-ZIP

BOCA RATON FL

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

1. TITLE

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

SIGNATURE:

Allen Weingarten
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNER OFFICER OR DIRECTOR

2/20/95

407-997-0010