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FILED

Feb 23 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S95176 (1)
1. Corporation Name
L.S.L. INVESTMENTS, INC.



Principal Place of Business

1206 BUCHANAN ST
HOLLYWOOD FL 33019

Mailing Address

1206 BUCHANAN ST
HOLLYWOOD FL 33019

DO NOT WRITE IN THIS SPACE

SEE NEW ADDRESS

SEE NEW ADDRESS

2. Principal Place of Business

21 581, Blue Heron Drive
Suite, Apt. #, etc.

22 B 106
City & State

23 Hallandale, Florida
Zip Country

24 33009

25 FL

2a. Mailing Address

26 P.O. BOX # 85121
Suite, Apt. #, etc.

27
City & State

28 HALLANDALE, florida
Zip Country

29 33008

30 FL

3. Date Incorporated or Qualified

11/18/1991

4. FEI Number

65-0294106

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

ST LAURENT, LISE
1206 BUCHANAN ST
HOLLYWOOD FL 33020

SEE NEW ADDRESS

#82 to #85

10. Name and Address of New Registered Agent

81 Name

~~Lise St-Laurent~~

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

581, Blue Heron Drive

83

Unit B 106

84

City
Hallandale

FL

85

Zip Code
33009

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

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NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

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; 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

Lise St-Laurent President Feb. 16-1998

CR2E034 (10/97)