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FILED

May 14 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # V18764 (3)
1. Corporation Name
LAQ, INC.



Principal Place of Business
550 BILTMORE WAY
STE - 1110
CORAL GABLES FL 33134
US

Mailing Address
550 BILTMORE WAY
STE - 1110
CORAL GABLES FL 33134-5730
US

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

WEISENFELD, JOSEPH J.
799 BRICKELL PLAZA
#900
MIAMI FL 33131

3. Date Incorporated or Qualified

03/05/1992

3a. Date of Last Report

04/22/1996

4. FEI Number

65-0420859

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

10. Name and Address of New Registered Agent

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

(NOTE: Registered Agent signature required when consenting)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME STERN, RODOLFO
STREET ADDRESS 550 BILTMORE WAY #1110
CITY-ST-ZIP CORAL GABLES FL 33134

TITLE DP ☐ DELETE

NAME ECKSTEIN, BERNARD
STREET ADDRESS 550 BILTMORE WAY #1110
CITY-ST-ZIP CORAL GABLES FL

TITLE VTD ☐ DELETE

NAME SERVANSKY, DAVID
STREET ADDRESS 550 BILTMORE WAY #1110
CITY-ST-ZIP CORAL GABLES FL 33134

TITLE VSD ☐ DELETE

NAME HORWITZ, ROBERTO
STREET ADDRESS 550 BILTMORE WAY #1110
CITY-ST-ZIP CORAL GABLES FL 33134

TITLE VD ☐ DELETE

NAME STERN, EDUARDO
STREET ADDRESS 550 BILTMORE WAY #1110
CITY-ST-ZIP CORAL GABLES FL 33134

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 registered agent, or both, and am 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, and that I am familiar with an address.

SIGNATURE

Rodolfo Stern

4-24-97

(305) 551-1311

CR2E034 (9/96)