FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 APR -7 AM 4:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **V31378** **(5)**

1. Corporation Name
L & L ON OAKLAND PARK BLVD., INC.

Principal Place of Business	Mailing Address
~~888 SOUTH ANDREWS AVE.~~ ~~SUITE 303~~ ~~FT LAUDERDALE FL 33316~~	~~888 SOUTH ANDREWS AVE.~~ ~~SUITE 303~~ ~~FT LAUDERDALE FL 33316~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/24/1992
3a. Date of Last Report: 02/21/1994

2. Principal Place of Business	2a. Mailing Address
21 2875 NE 191 ST.	26 2875 NE 191 ST.
22 Suite, Apt. #, etc. SUITE 903	27 Suite, Apt. #, etc. SUITE 903
23 City & State NO. MIAMI FL.	28 City & State NO. MIAMI FL.
24 Zip 33180 25 Country DADE	29 Zip 33180 30 Country DADE

4. FEI Number: 65-0328108 — 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 § 199.032, Florida Statutes ☐ Yes ☑ No

9. Name and Address of Current Registered Agent

~~CORPORATION INFORMATION SERVICES INC.~~
~~1201 HAYS ST.~~
~~TALLAHASSEE FL 32301~~

10. Name and Address of New Registered Agent

81 Name: CAROLE LANDA
82 Street Address (P.O. Box Number is Not Acceptable): 2875 NE 191 ST.
83 SUITE 903
84 City: NO. MIAMI FL 85 Zip Code: 33180

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: Carole Landa CAROLE LANDA 4/4/95
(Signature, Typed or Printed Name of Registered Agent and Date) (If Registered Agent is an Individual)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
TITLE	DPS	11 TITLE	DPS ☑ Change ☐ Addition
NAME	~~LANDAU, LEO~~	12 NAME	LANDA CAROLE
STREET ADDRESS	~~888 S. ANDREWS AVE., #303~~	13 STREET ADDRESS	2875 NE 191 ST.
CITY ST ZIP	~~FT LAUDERDALE FL~~	14 CITY ST ZIP	NO. MIAMI, FL. 33180
TITLE	T	21 TITLE	T ☑ Change ☐ Addition
NAME	~~LANDAU, LEO~~	22 NAME	LANDA CAROLE
STREET ADDRESS	~~888 S. ANDREWS AVE., #303~~	23 STREET ADDRESS	2875 NE 191 ST.
CITY ST ZIP	~~FT LAUDERDALE FL~~	24 CITY ST ZIP	NO. MIAMI, FL. 33180
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY ST ZIP		34 CITY ST ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY ST ZIP		44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 above/on an attachment with an address.

SIGNATURE: Carole Landa 4/4/95 305-935-1000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Telephone Number)

0224438 CP