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95 MAY -1 PM 2:09

**SECRETARY OF STATE
 TALLAHASSEE, FLORIDA**

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Morton Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # V39429 (8)
 1. Corporation Name
LFH SUB I, INC.

Principal Place of Business % MORRIS J. WATSKY 700 N.W. 107 AVENUE MIAMI FL 33172	Mailing Address % MORRIS J. WATSKY 700 N.W. 107 AVENUE MIAMI FL 33172
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 State, Apt. #, etc. 24 City & State	2a. Mailing Address 25 Suite, Apt. #, etc. 26 City & State 27 State, Apt. #, etc. 28 City & State 29 State, Apt. #, etc. 30 City & State
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3. Date Incorporated or Qualified 05/28/1992	3a. Date of Last Report 05/01/1994
4. FFI Number 65-0335815	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 has notice for information as required by Florida Statutes. ☒ Yes ☐ No	

9. Name and Address of Current Registered Agent
**NEALON, THOMAS 111 F
 760 NW 107 AVE.
 SUITE 400
 MIAMI FL 33172**

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 607.0503, 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 hereby sworn, and accept the provisions of Section 607.0503, Florida Statutes.

SIGNATURE _____ **OFFICE USE ONLY** _____ **DATE** _____

12. OFFICERS AND DIRECTORS	
12a. NAME	DP MILLER, LEONARD
12b. STREET ADDRESS	700 N.W. 107 AVENUE
12c. CITY & STATE	MIAMI FL
12d. NAME	DV BOLOTIN, IRVING
12e. STREET ADDRESS	700 N.W. 107 AVENUE
12f. CITY & STATE	MIAMI FL
12g. NAME	DS COLE, ROBERT B.
12h. STREET ADDRESS	700 N.W. 107 AVENUE
12i. CITY & STATE	MIAMI FL
12j. NAME	DV PEKOR, ALLAN J.
12k. STREET ADDRESS	700 N.W. 107 AVENUE
12l. CITY & STATE	MIAMI FL
12m. NAME	VC KRASNOFF, JEFFERY P
12n. STREET ADDRESS	700 NW 107 AVE.
12o. CITY & STATE	MIAMI FL
12p. NAME	AS SIERRA, KATHLEEN E.
12q. STREET ADDRESS	700 N.W. 107TH AVENUE
12r. CITY & STATE	MIAMI FL

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS	
13a. NAME	D.E
13b. STREET ADDRESS	
13c. CITY & STATE	
13d. NAME	
13e. STREET ADDRESS	
13f. CITY & STATE	
13g. NAME	
13h. STREET ADDRESS	
13i. CITY & STATE	
13j. NAME	
13k. STREET ADDRESS	
13l. CITY & STATE	
13m. NAME	
13n. STREET ADDRESS	
13o. CITY & STATE	

14. I, the undersigned, certify that the information supplied with this filing is, in all material respects, true and correct, and that my signature shall be a true and correct copy of the original. I am hereby sworn, and accept the provisions of Section 607.0503, Florida Statutes, and that my name appears in Block 12 of this filing as required by Section 607.0503, Florida Statutes.

SIGNATURE: *Kathleen E. Sierra* **Kathleen E. Sierra** **4/14/95 (305) 229-6400**