## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **V65846**

## LADY OF AMERICA FRANCHISE CORPORATION

			·		<u></u>				
Principal Place of Business Mailing Address									
2400 E COMME	RCIAL BLVD	2400 E COMMERCIAL BLVD							
STE 808		STE 808				DO NOT WRITE IN THIS SPACE			
FT LAUDERDAL	E FL 33308	FT LAUDERDALE FL 33308				3. Date Incorporated or Qualified			
						09/21/1992	•		
	(Participant	2a. Mailing	Address			4. FEI Number	<del></del> T	Applied For	
	ace of Business		Address			65-0374542 Not Applicable			
21			Suite, Apt. #, etc.			05 0074342	\$8.7	5 Additional	
Suite, Apt.	#, etc.	27	27			5. Certifcate of Status Desired	XI Fe	e Required	
City & Stati	8	City &	State			6. Election Campaign Financing	1 1	00 May Be	
23		28				Trust Fund Contribution		ded to Fees	
Zip	Country	Zip	_	Countr	у	This corporation owes the curre			
24	25 29 30		30	Fersonal Hoperty Tax.			□No		
	9. Name and Address of Curren	t Registered A	jent		A	10. Name and Address of New R	tegistered Agent		
				8	1 Name			- }	
WITTENBERNS, ROGER			8	82 Street Address (P.O. Box Number is Not Acceptable)					
_	EAST COMMERCIAL BLVD					The second section of the sec			
	E 808								
FT. LAUDERDALE FL 33308				9	4 City	TO A STAN WAS A STAN OF THE ST	85	Zip Code	
				-			FL		
office or r agent. I a	to the provisions of Sections 607.050 registered agent, or both, in the State im familiar with, and accept the obligations.	of Fiorida Silch	coange was alli	monzea o	v une condora	rporation submits this statement for the ation's board of directors. I hereby accep	purpose of changin t the appointment a	g its registered is registered	
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable	. (NOTE: F	Registered Ag	ent signature requ	lired when reinstating).	DATE		
12.		ID DIRECTORS		13.		ADDITIONS/CHANGES TO OF			
TITLE	PD	-	DELETE	1.1 TITLE	:		☐ Cha	nge 🗌 Addition	
NAME	WITTENBERNS, ROGER			1.2 NAME					
STREET ADDRESS				1.3 STRE	ET ADDRESS				
CITY-ST-ZIP	FT LAUDERDALE FL			1.4 CITY-	ST-ZIP				
TITLE	T DIODETIONEE TE		DELETE	2.1 TITLE			☐ Cha	inge	
NAME				2.2 NAMI	<b>■</b>			}	
STREET ADDRESS				2.3 STRE	ET ADDRESS				
CITY-ST-ZIP				2, 4 CITY	-ST-ZIP				
TITLE	: .		☐ DELETE	3.1 TITLE			☐ Cha	ange 🗀 Addition	
NAME	The state of the s			3.2 NAM	E !				
STREET ADDRESS				3.3 STRE	ET ADDRESS	14 . 15 A Carren	Section 1987	经延迟期 期間 6次	
CITY-ST-ZIP	[* - **]			3.4. CITY	-ST-ZIP		<u> [2] 细胞的 物質數</u>	COLUMN AND THE	
TITLE			☐ DELETE	4.1 TITLE	: T	and the second of the second o	क्रुतिक्रिक्कित्रिक्कित्रिक्कित्रिक्कित्रिक्कित्रिक्कित्रिक्कित्रिक्कित्रिक्कित्रिक्कित्रिक्कित्रिक्कित्रिक्कित	inge 新紀 Addition	
NAME				4. 2 NAM	E .				
STREET ADDRESS				4.3 STRE	ET ADORESS				
CITY-ST-ZIP				4.4 CITY	-ST-ZIP	·			
TITLE			DELETE	5.1 TITLE	: "	•	☐ Cha	ange 🔲 Addition 🖡	

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing of the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental amnual 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 of inster-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 en an attachment with an address, with all other like empowered.

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

54 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

DELETE

DELETE

**FILED** 

Feb 16, 1999 8:00am

**Secretary of State** 

a cross remain menna danga taken darah dang delah delah delah delah didiki delah 1804

02-16-1999 90064 033 \*\*\*158.75

Change

☐ Addition