

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

FILED

**May 02 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 # M70695 (5)

1. Corporation Name
THE LORRAINE GROUP, INC.



Principal Place of Business: % REGISTERED AGENT + OFFICE INC, 13408 S.W. 112TH COURT, MIAMI FL 33176

Mailing Address: % REGISTERED AGENT + OFFICE INC, 13408 S.W. 112TH COURT, MIAMI FL 33176-5910

3. Date Incorporated or Qualified: 02/29/1988

3a. Date of Last Report: 02/06/1996

4. FEI Number: 65-0034246

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

2. Principal Place of Business

21. PLAZA TEN 3827 N 10 ST

22. STE 202

23. Mc ALLEN, TX

24. 78501

25. Country

26. 2531 NW 72ND AVENUE

27. SUITE B

28. MIAMI, FLORIDA

29. 33122

30. Country

9. Name and Address of Current Registered Agent

GUERRA, FRANCISCO A.
13408 S.W. 112TH COURT
MIAMI FL 33176x

2531 NW 72ND AVE STB
MIAMI, FL 33122

10. Name and Address of New Registered Agent

81. Name

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

83.

84. City

85. Zip Code

FL

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 _____ DATE _____

Signature, typed or printed name of registered agent and fee, if applicable. (NOTE: Registered Agent's signature required when re-registering.)

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	GUERRA, FRANCISCO A.	PLAZA TEN 3827N
STREET ADDRESS	13408 S.W. 112TH COURT	10 ST STE 202
CITY-ST-ZIP	MIAMI FL	Mc ALLEN TX 78501
TITLE	VPS	<input type="checkbox"/> DELETE
NAME	GUERRA, MARTHA	PLAZA TEN 3827N
STREET ADDRESS	13408 S.W. 112TH COURT	10 ST STE 202
CITY-ST-ZIP	MIAMI FL	Mc ALLEN TX 78501
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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)(j), 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 if changed, or on an attachment with an address.

SIGNATURE _____

CR2E034 (9/96)