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 MAY -1 AM 7:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000087975 (6)**

1. Corporate Name
L1, INC.

Principal Place of Business	Mailing Address
460 WEST 84TH STREET **HIALEAH FL 33014**	**460 WEST 84TH STREET** **HIALEAH FL 33014**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **11/29/1994** | 3a. Date of Last Report:

2. Principal Place of Business	2a. Mailing Address	4. FEI Number: **65-0537615**	☐ Applied For ☐ Not Applicable
21	26		
Suite Apt. # etc.	Suite Apt. # etc.	5. Certificate of Status Desired ☐	**$8.75** Additional Fee Required
22	27		
City & State	City & State	6. Election Campaign Financing Trust Fund Contribution ☐	**$5.00** May Be Added to Fees
23	28		
Zip / Country	Zip / Country	8. The corporation has liability for intangible tax under S. 199.042 Florida Statutes ☐ Yes ☐ No	
24 / 25	29 / 30		

9. Name and Address of Current Registered Agent

PHILLIPS, EVAN
460 WEST 84TH STREET
HIALEAH FL 33014

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 _____ DATE
(Signature of the president, vice president, or other agent of the corporation) (If not, Registered Agent's signature required before changing)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	☐ Change ☐ Addition
NAME	PHILLIPS, EVAN	12 NAME	
STREET ADDRESS	460 WEST 84TH STREET	13 STREET ADDRESS	
CITY ST ZIP	HIALEAH FL 33014	14 CITY ST ZIP	
TITLE	D	21 TITLE	D ☒ Change ☐ Addition
NAME	LEOB, JASON	22 NAME	LOEB, JASON
STREET ADDRESS	460 WEST 84TH STREET	23 STREET ADDRESS	460 WEST 84th ST
CITY ST ZIP	HIALEAH FL 33014	24 CITY ST ZIP	HIALEAH, FL 33014
TITLE	D	31 TITLE	☐ Change ☐ Addition
NAME	PHILLIPS, LANE	32 NAME	
STREET ADDRESS	460 WEST 84TH STREET	33 STREET ADDRESS	
CITY ST ZIP	HIALEAH FL 33014	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 if changed or added by this amendment with an address.

SIGNATURE: Evan P. Phillips Jr. 04/28/95 (305) 821-6090
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Telephone Number

0084001 CP