2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F25816

1. Entity Name

LEONARD C. HOLLANDER C.L.U. & ASSOCIATES, INC.



FILED Jan 31, 2007 08:00 AM Secretary of State

Principal Place of Business

TWO SOUTH BISCAYNE BLVD

SUITE 1801 MIAMI, FL 33131 U Mailing Address

TWO SOUTH BISCAYNE BLVD

SUITE 1801

MIAMI, FL 33131 U



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UU.	NUI	VVRIIE	HV	1013	SPAU		3	

01162007 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For 59-2074061 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HOLLANDER, HOWARD J TWO SOUTH BISCAYNE BLVD SUITE 1801 MIAMI, FL 33131

DO NOT WRITE IN THIS SPACE

		<u>, , , , , , , , , , , , , , , , , , , </u>								
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.										
SIGNATURE										
FiL After M	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Finan Trust Fund Contribution.	cing \$5.00 May Be Added to Fees							
10.	OFFICERS AND DIREC	TORS								
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HOLLANDER, LEONARD C 11404 BOCA WOODS LANE BOCA RATON, FL 33428			U00000614215 02/06/07-80016-022 150.00						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST HOLLANDER, HARRIET 11404 BOCA WOODS LANE BOCA RATON, FL 33428			00/ 00/ 00 000 0EE 150/00						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HOLLANDER, HOWARD J TWO SOUTH BISCAYNE BLVD, SUIT MIAMI, FL 33131	E 1801	DO NOT WRITE							
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TITLE NAME STREET ADDRESS CITY-ST-ZIP										
TITLE NAME STREET ADDRESS CITY-ST-ZIP										

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: HOURS TO THOUSE HOUSE DIRECTOR

1/17/07 305-357-4633 Daytime Phone 8