## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Morthani
Secretary of State
DIVISION OF CORPORATIONS

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1. Corporation	MENT # 37358 LEANERS, INC.	30 (0)			
Principal Place C/O HARRY S 152 GRANDVI LAKE PLACID	s. Kaplan Iew Boulevard	Mailing Address C/O HARRY S. KAPL/ 152 GRANDVIEW BOU LAKE PLACID FL 338	ILEVARD	Tote Incorporated or Qualified 12/03/1970	3a. Date of Last Report 01/19/1995
2. Principal Pla	ace of Business	2a. Mailing Address		4. Fet Number 59-1308006	Applied For  Not Applicable
Suite, Apt. #	⊭, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State	)	City & State		6. Election Campaign Financing	Fee Required  \$5.00 May Be
23	,	28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for	intangible tax under s. 199.032, s. [ZTNo
24	9. Name and Address of Curre	29 ent Registered Agent	30	Florida Statutes Yes  10. Name and Address of New F	
			81 Name		
KAPLAN,			82 Street Addr	ress (P.O. Box Number is Not Acceptat	ole)
	Andview BLVD. .acid Fl 33852		83		
LANE I'E	NOID 1 E 00032				· · · · · · · · · · · · · · · · · · ·
			84 City		FL 85 Zip Code
or registere	o the provisions of Sections 607.050 ed agent, or both, in the State of Flo h, and accept the obligations of, Se	orida. Such change was authoria	zed by the corporation's boar	ation submits this statement for the pured of directors. Thereby accept the app	rpose of changing its registered office lointment as registered agent. Lam
SIGNATURE _					
· -	Slocuture, breed or printed name of registered app	ent and lith, if applicable (N)	ÖTE: Recedend Agest sugature recere		DA*t
12.	Signature - typed or printed name of registered agr OFFICERS A	ent and tribi it applicable (N ND DIRECTORS	ÖTE Registered Agest soprature measure.  13.	awter executing	
	OFFICERS A		13.		
12. THLE NAME	OFFICERS A P KAPLAN, HARRY S.	ND DIRECTORS	13. 1 1 THLE 12 NAME		ICERS AND DIRECTORS IN 12
12.  TITLE  NAME  STREET ADDRESS	P KAPLAN, HARRY S. 152 GRANDVIEW BLVD.	ND DIRECTORS	13. 1 1 TILLE 1 2 NAME 1.3 STREET ADDRESS		ICERS AND DIRECTORS IN 12
12. THLE NAME	P KAPLAN, HARRY S. 152 GRANDVIEW BLVD.	ND DIRECTORS	13. 1 1 THLE 12 NAME		ICERS AND DIRECTORS IN 12
12. DITLE NAME STREET ADDRESS CITY-ST-ZIP	P KAPLAN, HARRY S. 152 GRANDVIEW BLVD. LAKE PLACID FL V KAPLAN, A.N.	ND DIRECTORS ☐ DELETE	13. 1 1 TILLE 1 2 NAME 1.3 STREET ADDRESS 1.4 CHY-ST-ZIF 2 1 TILLE	ADDITIONS/CHANGES TO OFF	ICE FIS AND DIFFECTORS IN 12  Change Addition  Change Addition
12.  DILE NAME STREET ADDRESS CITY-ST-ZIP TITLE	P KAPLAN, HARRY S. 152 GRANDVIEW BLVD. LAKE PLACID FL V KAPLAN, A.N9235 SW 130TH ST	ND DIRECTORS ☐ DELETE	13. 1 1 TILLE 1 2 NAME 1.3 STREET ADDRESS 1.4 CHY-ST-ZIF 2 1 TILLE	ADDITIONS/CHANGES TO OFF	ICE FIS AND DIFFECTORS IN 12  Change Addition  Change Addition
12.  DILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	P KAPLAN, HARRY S. 152 GRANDVIEW BLVD. LAKE PLACID FL V KAPLAN, A.N. 9235 SW 1307H-ST-	ND DIRECTORS DELETE    DELETE	13. 1 1 TILLE 1 2 NAME 1.3 STREET ADDRESS 1.4 CHY-ST-ZIF 2 1 TILLE	ADDITIONS/CHANGES TO OFF	ICE FIS AND DIFFECTORS IN 12  Change Addition  Change Addition
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12.  DITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	P KAPLAN, HARRY S. 152 GRANDVIEW BLVD. LAKE PLACID FL V KAPLAN, A.N 0235 CW 130TH ST- MIAMI FL ST KAPLAN, ANNA 152 GRANDVIEW BLVD.	ND DIRECTORS  DELETE    DELETE	13.  1 1 TILLE 1 2 NAME 1 3 STREEL ADDRESS 1 4 CITY - ST - ZIF 2 1 TILLE 2 2 NAME 2 3 STREEL ADDRESS 2 4 CITY - ST - ZIF 3 1 TILLE 3 2 NAME 3 3 STREEL ADDRESS	ADDITIONS/CHANGES TO OFF	ICE FIS AND DIFFECTORS IN 12  Change Addition  Change Addition
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12.  DITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME	P KAPLAN, HARRY S. 152 GRANDVIEW BLVD. LAKE PLACID FL V KAPLAN, A.N 0235 CW 130TH ST- MIAMI FL ST KAPLAN, ANNA 152 GRANDVIEW BLVD.	DELETE  DELETE  DELETE  DELETE  DELETE	13. 1 1 TILLE 1 2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIF 2 1 TILLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIF 3 1 TILLE 32 NAME 33 STREET ADDRESS 3.4 CITY-ST-ZIF 4.3 TILLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIF 5.1 TILLE 5.2 NAME 5.3 STREET ADDRESS 4.4 CITY-ST-ZIF 5.1 TILLE 5.3 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIF 6.1 TILLE	ADDITIONS/CHANGES TO OFF	Change Addition  Change Addition  Change Addition  Change Addition  Change Addition  Change Addition

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:

THE OFFINITED NAME OF SIGNING OFFICER OR DIRECTOR

1/13/96 (941)465-3189

CR2E034 (12/95)