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

PROFIT CORPORATION: ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # 612755

1. Corporation Name

LEHIVIAN	MANUFACTURING COMPA	INT, INC.					
Principal Place	e of Business	Mailing Address			IBF BISI BIBII BIBII BIB	() BIBLE BEDIE BIBLE	1491
		3700 NE 6TH DRIVE		·.			
3700 NE 6TH D BOCA RATON		BOCA RATON FL 33431					
BOOK HATON	1 E 00101	. 50011 1111 1111 1111 1111		DO NOT WRI	TE IN THIS SPAC	E	
		•		3. Date Incorporated or Qualifed	-		1
• .				03/13/1979			
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number		Applied Fo	ır
21	•	26		22-1868987		Not Applica	able
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	1 .	3.75 Additiona	al
22		27		5. Certificate of Status Desired	ш. <u> </u>	Fee Required	
City & Stat	e	City & State		6. Election Campaign Financing	\$	5.00 May Be	
23		28		Trust Fund Contribution		Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes the curr	ent year Intangibl	е	
24	25	29	30	Personal Property Tax.	X	es □No	
	9. Name and Address of Curren		·	10. Name and Address of New F	Registered Agent	ł į	
<u>~</u> _	3. Name of the state of the sta		81 Name				
LEH	MAN, ROGER	,	20 0	(0.0. D. N N	-hia		
3700 NE 6TH DRIVE			82 Street A	ddress (P.O. Box Number is Not Accepte	adie)		
BOCA RATON, FL			83		19696 43 6	TENERAL PROPERTY	1321
334		•	**			月程5年8月1日日	1201
3040	, ,		84 City		E 85	Zip Code	
Sapar sim merit .	and the second s	er i jag ka i					
11 Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes	s, the above-named of thorized by the cornor	corporation submits this statement for the ration's board of directors. I hereby accept	purpose of chang of the appointmen	ing its registered	eu
office or i	registered agent, or both, in the State am familiar with, and accept the obliga	ations of, Section 607.0505, Florid	da Statutes.	latter a Book of all dotters. Thereby deep	,	-	
				•			_
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable. (NOTE: F	Registered Agent signature re	quired when reinstating)	DATE		
12.	OFFICERS AN	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OF			
TITLE	VD	□ DELETE					
NAME	LEHMAN, ROGER		1.1 TITLE		Пс		12ddition
STREET ADDRESS	ATTOM NIC ATTU DO		1.1 TITLE 1.2 NAME	4.4 TA4			
CITY-ST-ZIP			1				
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11445	BOCA RATON, FL 00000	☐ DELETE	1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE	(A) 1		Change	ddition
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14. I hereby certify that the information supplied with this filing 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 of 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 attactment with an address, with all other like empowered.

5.4 CITY-ST-ZIP

6.4 CITY+ST-ZIP

6.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

SIGNATURE:

""哈"城南部。"

KERN POST

TITLE

NAME

STREET ADDRESS

□ DELETE

FILED

Jan 25, 1999 8:00am

Secretary of State

01-25-1999 90015 038 ***150.00

Change

Addition