

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # F84856

(6)

1. Corporation Name

L.E.N. ENTERPRISES, INC.

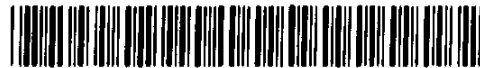
Principal Place of Business

124-26 F QUEENS BLVD
KEW GARDENS NY 11415
US

Mailing Address

124-26 F QUEENS BLVD
KEW GARDENS N 11415
US

FILED
Jul 20 1998 8:00am
Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/04/1982

4. FEI Number

59-2202966

Applied For

Not Applicable

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

9. Name and Address of Current Registered Agent

LYNN, LOUIS E
19204 NE 25 AVE
STE 314
N MIAMI BEACH FL 33180

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME LYNN, NATALIE
STREET ADDRESS 19204 NE 25TH AVE, #314
CITY-ST-ZIP N MIAMI BEACH FL

TITLE ☐ DELETE

NAME LYNN, NATALIE
STREET ADDRESS 19204 NE 25TH AVE, #314
CITY-ST-ZIP N MIAMI BEACH FL

TITLE ☐ DELETE

NAME LYNN, LOUIS EDWARD
STREET ADDRESS 19204 NE 25TH AVE, #314
CITY-ST-ZIP N MIAMI BEACH FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

500002594135
-07/21/98--01065--046
***150.00

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 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: Louis E. Lynn

7/14/98

19 544-1182

CR2E034 (5/98)

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7/18/98

TO WHOM IT MAY CONCERN,

RE: ANNUAL REPORT.

FROM: L.E.N. ENTERPRISES INC. 59-2202966

I AM WRITING TO YOU TO EXPLAIN WHY MY FIRST REPORT AND PAYMENT WERE NOT RECEIVED

MY ANNUAL REPORT WAS MAILED TO YOU ON APRIL 18, 1998. ALSO, OTHER BILLS AND CORRESPONDENCE WERE MAILED ON THAT DATE.

IT HAS BECOME APPARENT TO ME THAT MUCH OF MY MAIL FROM 4/18/98-4/25/98 WAS LOST OR MISPLACED BY A TEMPORARY POSTAL EMPLOYEE.

IF MY RECORDS WERE CHECKED, YOU WILL FIND THAT THIS IS THE FIRST TIME A DEADLINE WAS MISSED.

I AM ASKING THAT AN EXCEPTION TO THE RULE BE APPLIED IN MY SITUATION - LATE PENALTY FEES BE WAIVED

THANK YOU FOR YOUR UNDERSTANDING + CONSIDERATION.

RESPECTFULLY,

Lawrence E. Lynn
Vice President