2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 12, 2001 8:00 am
Secretary of State
04-12-2001 90549 001 ***300.00

DOCUMENT # F98000003467

1. Entity Name
Le@P Technology, Inc.

Principal Place of Business
5601 N. Dixie Highway, #411
Ft. Lauderdale, FL 33334

Mailing Address
5601 N. Dixie Highway #411
Ft. Lauderdale, FL 33334

35912

2. Principal Place of Business
5601 N. Dixie Hwy, #411
Suite Apt. # etc.
Suite 411
City & State
Ft. Lauderdale, FL 33334
Zip 33334 Country U.S.A.

3. Mailing Address
5601 N. Dixie Hwy., #411
Suite Apt. # etc.
Suite 411
City & State
Ft. Lauderdale, Fl
Zip 33334 Country U.S.A.

4. FEI Number

5. Certificate of Status Desired $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION
1200 SOUTH LINE ISLAND ROAD
PLANTATION, FLORIDA 33324

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip

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.

SIGNATURE
Signature, typed or printed name of registered agent (if applicable) Date (required if agent is changing)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
Make Check Payable to Department of State

10. Electronic Filing Fee $5.00 Mail Fee Additional Fee

11. OFFICERS AND DIRECTORS		12. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS	
TITLE	President, Director	TITLE	Director
NAME	Tancredi, Robert G.	NAME	Rydzewski, John
STREET ADDRESS	5601 N. Dixie Highway, #411	STREET ADDRESS	5601 N. Dixie Highway #411
CITY-ST-ZIP	Ft. Lauderdale, Florida 33334	CITY-ST-ZIP	Ft. Lauderdale, FL 33334
TITLE	Chairman	TITLE	Director
NAME	M. Lee Pearce, M.D.	NAME	Valle, Jose
STREET ADDRESS	5601 N. Dixie Highway, #411	STREET ADDRESS	5601 N. Dixie Highway, #411
CITY-ST-ZIP	Ft. Lauderdale, Fl 33334	CITY-ST-ZIP	Ft. Lauderdale, FL 33334
TITLE	Director	TITLE	Director
NAME	Ferguson, Thomas	NAME	Lincoln, Timothy
STREET ADDRESS	125 Worth Avenue #314	STREET ADDRESS	5601 N. Dixie Highway, #411
CITY-ST-ZIP	Palm Beach, FL	CITY-ST-ZIP	Ft. Lauderdale, FL 3334
TITLE		TITLE	Director
NAME		NAME	Broy, Laurence
STREET ADDRESS		STREET ADDRESS	5601 N. Dixie Highway, Suite 411
CITY-ST-ZIP		CITY-ST-ZIP	Ft.Lauderdale, Fl 33334
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

13. 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 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 11 or 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR