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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 23, 1999 8:00 am Secretary of State 04-23-1999 90128 027 ***150.00

DOCL	JMENT	# 17	ng 7	717
	7 I V I I I I I I	" LI	UICTI	

1. Corporation Name

L & E INTERNATIONAL SERVICES, INC.

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						1.0017411 811 80101 10111 10801 11811 10814 51811 01814 51811 01814 87811 1081
Principal Plac		Mailing Address	_			
380 WEST 78 HIALEAH FL 33	= =	380 WEST 78 ROA HIALEAH FL 33014				
US		US	•			DO NOT WRITE IN THIS SPACE
55		00				3. Date Incorporated or Qualified
	,					08/14/1989
2. Principal P	Place of Business	2a. Mailing Addre	ss			4. FEI Number Applied For
21		26				65-0151967 Not Applicable
Suite, Apt.	# etc.	Suite, Apt. #,	etc.			\$8.75 Additional
22		27				5. Certificate of Status Desired Fee Required
City & Stat	le	City & State				6 Flection Compaign Financing \$5.00 M. B.
23		28			Trust Fund Contribution Added to Fees	
Zip	Country	Zip Country			8. This corporation owes the current year Intangible	
24	25	29				Personal Property Tax.
	9. Name and Address of Curren					10. Name and Address of New Registered Agent
				81	Name	
) DE I	LA PENA, VILLANUEVA & BAJANI	DAS LLP		<u> </u>	<u></u>	
601	BRICKELL KEY DRIVE			82	Street /	et Address (P.O. Box Number is Not Acceptable)
SUN	TE 705			83		
MIAI	MI FL 33131				į	
				84	City	FL 85 Zip Code
44 Dureuant	to the provinienc of Sections 607 055	2 and 607 1509. Florid	a Statutos th	an ohou	nomed.	· · · · · · · · · · · · · · · · · · ·
office or r	egistered agent, or both, in the State of	of Florida. Such change	e was author	ized by	the corpo	ed corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
agent. I a	m familiar with, and accept the obligat	tions of, Section 607.0	505, Florida S	Statutes		
SIGNATURE		3-3/				
12.	Signatura Syped or printed name of registered agen OFFICERS AN				it signature re	e required when reinstating) DATE APPLITIONS (CHANCES TO OFFICERS AND DIRECTORS IN 42)
TITLE	P	□ DE		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
NAME	GOMEZ, LORENA	Ç 52.	_			
[871 N. VENITIAN DRIVE			1.2 NAME		
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP	MIAMI FL VP			1.4 CITY-S	T-ZIP	
TITLE		☐ DE		2.1 TITLË		☐ Change ☐ Addition
NAME	GOMEZ, ESTEBAN E		1	2.2 NAME	-	
STREET ADDRESS	871 N VEITIAN DRIVE		1	2.3 STREET	ADDRESS	is .
CITY-ST-ZIP	MIAMI FL			2. 4 CITY-S	T-ZIP	
TITLE	8	□ DEI	ETE 3	3.1 TITLE	1	☐ Change ☐ Addition
NAME	BAJANDAS, RICARDO		3	3.2 NAME	1	
STREET ADDRESS	601 BRICKELL KEY DRIVE STE	. 705	3	3.3 STREET	ADDRESS	s .
CITY-ST-ZIP	MIAMI FL 33131			3.4. CITY-S	T-ZIP	
TITLE		☐ DEI	ETE 4	4.1 TITLE	T	☐ Change ☐ Addition
NAME			4	I. 2 NAME	- 1	· ·
STREET ADDRESS	•		4	1.3 STREET	ADDRESS	s
CITY-ST-ZIP		·	_ [4.4 CITY-ST	r-ZIP	
TITLE		☐ DEI	ETE 5	5.1 TITLE		Change Addition
NAME	ي يا يا		~ ~ ~⇒,5	3.2 NAME]	
STREET ADDRESS			5	5.3 STREET	ADDRESS	s
CITY-ST-ZIP	i e		5	5.4 CITY-ST	-ZIP	
TITLE		DEL	ETE 6	.1 TITLE	+	☐ Change ☐ Addition
NAME			6	3.2 NAME		
STREET ADDRESS			6	3.3 STREET	ADDRESS	s
CITY-ST-ZIP	Th. 7. 1. 2. 1. 1.			3.4 CITY-\$1	- 1	
GITT OF All	**			•		

14. I hereby certify that the information supplied with this filing deep 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, with all other like empowered.

URE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OF

Daytime Phone #