

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 31, 2001 8:00 am
Secretary of State

0067035
 AV

DOCUMENT # L44925

1. Entity Name

LE'DURZ IMAGES ENTERPRISES INC.

07-31-2001 90001 005 ***150.00

Principal Place of Business

% ANA MARIA DUARTE
8357 W. SUNRISE BLVD.
PLANTATION FL 33322

Mailing Address

% ANA MARIA DUARTE
8357 W. SUNRISE BLVD.
PLANTATION FL 33322



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0169420

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DUARTE, ANA MARIA

8357 W. SUNRISE BLVD.
PLANTAION FL 33322

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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 \$550.00 /50
After September 12, 2001 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

P
DUARTE, ANA MARIA
8357 W. SUNRISE BLVD.
PLANTATION FL

☐ Delete

TITLE
 NAME
 STREET ADDRESS
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☐ Change ☐ Addition

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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 Block 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

Ana Maria Duarte 7/18/01 954-452-4482
 Date Daytime Phone #

CR2E034 (5/01)

Attachment # L 44925
A0019196

July 18, 2002

FROM: Ledur2 Images Enterprises Inc.
R.A. ANAMARIA DUARTE
8357 W. SUNRISE BLVD.
PLANTATION, FL. 33322

TO: DIVISION OF CORPORATIONS
UNIFORM BUSINESS REPORT FILINGS
P.O. BOX 1500
TALLAHASSEE, FL. 32302-1500

ENCLOSE PLEASE FIND A CHECK #2631 IN THE AMOUNT
OF ONE HUNDRED FIFTY AND 00/100 DOLLARS (\$150⁰⁰/₁₀₀)
THIS AMOUNT IS BEING SEND BECAUSE WE DID NOT
RECEIVE THE ORIGINAL NOTICE OF AMOUNT DUE, AND
IT COVERS NORMAL FEE.

THANKING YOU IN ADVANCE FOR YOUR ACCEPTANCE

Respectfully-

ANA MARIA DUARTE (REGISTERED AGENT)