Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90247 015 \*\*\*150.00

## 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

## **DOCUMENT # M02411**

<ol> <li>Corporation</li> </ol>	Name	_			.		
LEN ACQUISITION CORPORATION, INC.							
B.C. C. HBI.	· · · · · · · · · · · · · · · · · · ·	Mailing Address		<del> </del>	! <u>                                    </u>	ik Bibli bibli bibli	
760 NW 107TH AVE 760 NW 107TH AVE MIAMI FL 33172 MIAMI FL 33172							
US US					DO NOT WRITE IN TH	HIS SPACE	
					3. Date Incorporated or Qualifed		
		a Mailing Address			07/03/1984 4 FEI Number	Δ	pplied For
2. Principal Place of Business 2a. Mailing Address 21			55		59-2425526	<u> </u>	ot Applicable
21   26   Suite, Apt. #, etc. Suite, Apt. #, etc.			etc.				Additional
22 117		الماك ومسلط	Glitt 300		5. Certifcate of Status Desired	Fee R	tequired
City & State City & State					6. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution	Added	to Fees
Zip	Country	Zip	Cou	ntry	<ol><li>This corporation owes the current year</li></ol>		mu_
24		29	30		Personal Property Tax.	Yes Yes	□ No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name							
RUBI	in, shelly						
760 NW 107TH AVE					Address (P.O. Box Number is Not Acceptable)		
MIAMI FL 33172				83	3/1-0-880		
					<u> </u>	loc! 7in	Code
	4			84 City	-	-L	
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida	Statutes, the al	pove-named	corporation submits this statement for the purpose	of changing its	s registered
office or re agent. I a	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change ations of, Section 607.05	e was authorized 505, Florida Statt	ites.	oration's board of directors. I hereby accept the ap	pointment as it	ogiotoroa
SIGNATURE	<u>.</u>					- to to the total of the total	
	Signature, typed or printed name of registered age			Agent signature r	required when reinstating) DATE  ADDITIONS/CHANGES TO OFFICERS		OPS IN 12
12.	OFFICERS AI	ND DIRECTORS	ETE 1.1 TI	n F	ADDITIONS/CHANGES TO OFFICERS	Change	
T/TLE NAME	_		1.2 NA				
STREET ADDRESS				REET ADDRESS			
CITY-ST-ZIP	1.111.11.11.11			TY-ST-ZIP			
TITLE	DC	☐ DELETE 2.11		TLE		Change	Addition
NAME	MILLER, STUART A.	ER, STUART A. 22		ME			,
STREET ADDRESS	760 NW 107TH AVE			REET ADDRESS	suite 300		
CITY-ST-ZIP	MIAMI FL 33172			ITY-ST-ZIP	3011=0 300		
TITLE	V	, DEI				Change	Addition
NAME	RUBIN, SHELLY		3.2 NA		,		
STREET ADDRESS	760 NW 107TH AVE			REET ADDRESS	Suite 300		
CITY-ST-ZIP	MIAMI FL 33172	□ DE		ITY-ST-ZIP		☐ Change	Addition
TITLE	DCEO SAIONTZ, STEVEN J.	02	4.1 H		·		7
NAME express appeared	760 NW 107TH AVE			REET ADDRESS	- 1. 3 11/2		
STREET ADDRESS CITY-ST-ZIP	MIAMI FL 33172			TY-ST-ZIP	suite 314		
TITLE	T	□ DE				Change	Addition
NAME	JORDAN, MARGARET		5.2 N	AME	, ,		۷ .
STREET ADDRESS	760 NW 107TH AVE		5.3 ST	REET ADDRESS	Suite 300		
CITY-ST-ZIP	MIAMI FL 33172			TY-ST-ZIP			
TITLE	AS	, DE			AS COLLEGE	Change	Addition
NAME	MCMICKLE, J. T.		6.2 N/		HRNELL, PETA-6	cAY	
STREET ADDRESS	760 NW 107TH AVE		6.3 ST	TREET ADDRESS	Suite 300  AS  Suite 300	/	
i .					_ =		

CITY-ST-ZIP 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, with all other like empowered.

6.4 CITY-\$T-ZIP

MIAMI FL 33172

MARGARET JORDAN, TREASURER