

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 28, 2002 8:00 am
Secretary of State

05-28-2002 91526 014 ***150.00

DOCUMENT # P00000016773

1. Entity Name

L & N ENTERPRISE SERVICES INC.

Principal Place of Business

**3056 SOUTH STATE ROAD 7 #34
 MIRAMAR FL 33028**

Mailing Address

**3056 SOUTH STATE ROAD 7 #34
 MIRAMAR FL 33028**



2. Principal Place of Business

6115 Miramar Parkway

3. Mailing Address

6115 Miramar Parkway

Suite, Apt. #, etc.

Suite J

Suite, Apt. #, etc.

Suite J

City & State

Miramar fl

City & State

Miramar FL

4. FEI Number

65-0768852

Applied For

Not Applicable

Zip

33023

Country

BROWARD

Zip

33023

Country

BROWARD

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ALBURY, LINDA

**3056 SOUTH STATE ROAD 7 #34
 MIRAMAR FL 33023**

7. Name and Address of New Registered Agent

Name

LINDA ALBURY

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

6115 Miramar Parkway Suite J

City

Miramar

FL

Zip Code
33023

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 \$150.00
 After May 1, 2002 Fee will be \$550.00
 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

TITLE **P** ☐ Delete
 NAME **ALBURY, LINDA**
 STREET ADDRESS **3056 SOUTH STATE ROAD 7 #34**
 CITY-ST-ZIP **MIRAMAR FL 33023**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS **6115 Miramar Parkway Suite J**
 CITY-ST-ZIP **Miramar FL, 33023**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 NAME
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 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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Linda Albury
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/1/02
 Date

Daytime Phone #

CR2E034 (9/01)