

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2006 8:00 am
Secretary of State

02-09-2006 90037 021 ***150.00

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1. Entity Name
L & I REAL ESTATE HOLDINGS, INC.

Principal Place of Business
7700 N. KENDALL DR., #405
MIAMI, FL 33156

Mailing Address
7700 N. KENDALL DR., #405
MIAMI, FL 33156

2. Principal Place of Business
8660 W. FLAGLER ST
Suite, Apt. #, etc. #200

2. Mailing Address
8660 W. FLAGLER ST
Suite, Apt. #, etc. #200

01092006 Chg-P CR2E034 (11/05)

4. FEI Number
11-3653703

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

City & State
MIAMI FL
Zip 33144 Country USA

City & State
MIAMI FL
Zip 33144 Country USA

6. Name and Address of Current Registered Agent

LEITMAN, LORN
7700 N. KENDALL DR., #405
MIAMI, FL 33156

7. Name and Address of New Registered Agent

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

8660 W. FLAGLER ST, #200
City MIAMI FL Zip Code 33144

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME LEITMAN, LORN
STREET ADDRESS 7700 N. KENDALL DR., #405
CITY-STATE-ZIP MIAMI, FL 33156 ☐ Delete

TITLE TD
NAME JOSEPH, IRV
STREET ADDRESS 19451 NE 17TH AVE.
CITY-STATE-ZIP MIAMI, FL 33179 ☐ Delete

TITLE VD
NAME WAX, IRWIN
STREET ADDRESS 1624 PRESIDENTIAL WAY
CITY-STATE-ZIP NORTH MIAMI BEACH, FL 33179 ☐ Delete

TITLE SD
NAME SHUSTAK-WAX, LAURIE
STREET ADDRESS 1624 PRESIDENTIAL WAY
CITY-STATE-ZIP NORTH MIAMI BEACH, FL 33179 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS 8660 W. FLAGLER ST, #200
CITY-STATE-ZIP MIAMI FL 33144 ☒ Change ☐ Addition

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

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

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

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

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

(Lorn Leitman) President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/3/06
Date

305-227-5176
Daytime Phone #