

CORPORATION ANNUAL REPORT 1995

 FLORIDA DEPARTMENT OF STATE
 Sandra B. Morton
 Secretary of State
 DIVISION OF CORPORATIONS

LESKIN OF FLORIDA, INC.

Principal Place of Business	Mailing Address
990 N. FEDERAL HWY. SUITE 206 BOCA RATON FL 33432	990 N. FEDERAL HWY. SUITE 206 BOCA RATON FL 33432

2. Principal Place of Business		26. Mailing Address	
21	5880 N OCEAN DR	26	EASTPOINTE TWR 1MTH
State, Apt #, etc.		State, Apt #, etc.	
22		27	5380 N OCEAN DR
City & State		City & State	
23	SINGER ISLAND FL	28	SINGER ISLAND FL
Zip	Country	Zip	Country
24	33404	25	
29		30	PALM BEACH

9. Name and Address of Current Registered Agent

KUHNS, DIANE
EASTPOINTE TOWER I, SUITE PH-E
5380 N. OCEAN DR.
SINGER ISLAND FL 33404

3. Date Incorporated or Qualified 06/03/1993		3a. Date of Last Report 03/15/1994	
4. FEI Number 65-0430459		Applied For	Not Applicable
5. Certificate of Status Desired ☐		\$0.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
6. This corporation has liability for intangible tax under S. 199.032. Florida Statutes ☐ Yes ☐ No			

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

11. Pursuant to the provisions of Sections 607.0402 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.0406, Florida Statutes.

SIGNATURE

[illegible]

Journal of Management Education 30(6)p.789-804

12.	OFFICIALS AND EMPLOYEES
FILE	D
NAME	KUHN, DIANE
STREET ADDRESS	EASTPOINTE TOWER I #PH-E, 5380 N OCEAN DR.
CITY AND STATE	SINGER ISLAND FL 33404

NAME	D
LAST	LESKIN, J.H.
STREET ADDRESS	2360 AVE. A
CITY, ST, ZIP	BETHLEHEM PA 18017

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
NAME	Change	Addition

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$$\begin{aligned} \mathbf{f}_1 &= \begin{bmatrix} 1 \\ 0 \\ 0 \\ 0 \end{bmatrix}, \quad \mathbf{f}_2 = \begin{bmatrix} 0 \\ 1 \\ 0 \\ 0 \end{bmatrix}, \quad \mathbf{f}_3 = \begin{bmatrix} 0 \\ 0 \\ 1 \\ 0 \end{bmatrix}, \quad \mathbf{f}_4 = \begin{bmatrix} 0 \\ 0 \\ 0 \\ 1 \end{bmatrix}, \\ \mathbf{f}_5 &= \begin{bmatrix} 1 \\ 0 \\ 0 \\ 0 \end{bmatrix}, \quad \mathbf{f}_6 = \begin{bmatrix} 0 \\ 1 \\ 0 \\ 0 \end{bmatrix}, \quad \mathbf{f}_7 = \begin{bmatrix} 0 \\ 0 \\ 1 \\ 0 \end{bmatrix}, \quad \mathbf{f}_8 = \begin{bmatrix} 0 \\ 0 \\ 0 \\ 1 \end{bmatrix}, \\ \mathbf{f}_9 &= \begin{bmatrix} 1 \\ 0 \\ 0 \\ 0 \end{bmatrix}, \quad \mathbf{f}_{10} = \begin{bmatrix} 0 \\ 1 \\ 0 \\ 0 \end{bmatrix}, \quad \mathbf{f}_{11} = \begin{bmatrix} 0 \\ 0 \\ 1 \\ 0 \end{bmatrix}, \quad \mathbf{f}_{12} = \begin{bmatrix} 0 \\ 0 \\ 0 \\ 1 \end{bmatrix}, \\ \mathbf{f}_{13} &= \begin{bmatrix} 1 \\ 0 \\ 0 \\ 0 \end{bmatrix}, \quad \mathbf{f}_{14} = \begin{bmatrix} 0 \\ 1 \\ 0 \\ 0 \end{bmatrix}, \quad \mathbf{f}_{15} = \begin{bmatrix} 0 \\ 0 \\ 1 \\ 0 \end{bmatrix}, \quad \mathbf{f}_{16} = \begin{bmatrix} 0 \\ 0 \\ 0 \\ 1 \end{bmatrix}. \end{aligned}$$
$$E_{\text{eff}} = \frac{1}{2} \left(E_1 + E_2 \right)$$

14. The hereby certify that the information supplied with this filing, voluntarily furnished and true, and qualify for the exemption stated in Section 17102(b)(3), Florida Statutes, I further certify that the information submitted on the various reports of 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 agent or broker empowered to execute the request, required by Chapter 602, Florida Statutes, and that my signature appears in Block 12 of Block 13 of a completed annual report filed with my authority.

SIGNATURE: Deane Kuhns
SIGNATURE AND TYPED OR PRINTED NAME OF BINDING OFFICER OR DIRECTOR

3/21/95 610/865-3350