FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000056161 (1)

LEN GILBERT ASSOCIATES, INC.

Principal Place	e of Business	Mailing Address	Mailing Address								
10097 CLEARY BLVD. SUITE 330		10097 CLEARY BLVD.	SUITE 330								
		SUITE 330				Į.					
PLANTATION F	L 33324	PLANTATION FL 33324-	1065				Data land a land	Ta. 5			
						3.	Date Incorporated or Qualified 08/10/1993		ate of Last R /25/1996	ероп	
2. Principal Pl	ace of Business	28. Mailing Address				4.	FEI Number			oplied For	
21		26				Ì	65-0428659		No	ot Applicable	
Suite, Apt.	#, etc	Suite: Apt. #, etc.					0-25-1-40-1-5-1		\$8.75	Additional	
22		27				5.	Certificate of Status Desired	19	Fee Re	quired	
City & State)	City & State				6.	Election Campaign Financing		\$5.00	May Be	
23		28					Trust Fund Contribution			to Fees	
Zip	Country	Zip	Co	untry		8.	This corporation has liability for	ntangible	e tax under s	199.032,	
24	25	29	30				Florida Statutes] Yes	№ No		
	Name and Address of Curre	ent Registered Agent				10.	, Name and Address of New Re	gistered	Agent		
SCH	IWARTZ, DAVID A			81	Name						
818 1	I W BROWARD BLVD			82	Street Add	Iress (f	P.O. Box Number is Not Acceptab	le)			
SUIT	TE 204			-	000017100	11,000 (1		,			
PLA	NTATION FL 33324			83							
				84	City			FL	85 Zip (Code	
11, Pursuant	to the provisions of Sections 607.05	02 and 607 1508, Florida Sta	tutes, the a	.L	e-named cor	poration	on submits this statement for the p		of changing it	ts registered	
office or re	egistered agent, or both, in the Stat mitamiliar with land accept the obli	e of Florida. Such change wa	as authorize	ad by	the corpora	ition's	board of directors. I hereby accept	of the ap	pointment as	registered	
agent ra	m tamiliar with, and accept the obli	gations of, Section 607-0505,	Florida Sta	atutes	6						
SIGNATURE	Sugnitive Aport Sequenced traces of respect to the	contravalte d'ariel atto	vOTE Rogiston	od Age	nt signature repu	irad who	ng teinstatung)	DATE			
12.		ND DIRECTORS	13.	<u>_</u>	T. agradore read		ADDITIONS/CHANGES TO OFFIC		D DIRECTOR	S IN 12	
TITLE	P	DELETE		IITLE					Change	Addition	
NAME	GILBERT, LEONARD			NAME							
STREET ADDRESS	10190 SW 4TH ST			-	ADDRESS						
1	PLANTATION FL		1		ì						
CITY - ST - ZIP TITLE	ST	DELETE		DITLE	ST-ZIP				Change	Addition	
NAME	GILBERT, DAWN	L. Detrie		NAME					L. Orango	71351001	
ì	10190 SW 4TH ST		1								
STREET ADDRESS	PLANTATION FL				ADDRESS		<i>3</i> °	2.5			
CITY ST ZIP	PLANTARON FL	DELETE			ST-ZiP				Change	Addition	
TITLE				TITLE					L. Change	L.J Addition	
NAME				NAME							
STREET ADDRESS					ADDRESS						
CITY ST -ZIP		CTours			ST - ZIP				Channe	T Address	
TITLE		LT DELETE	1	TITLE					Change	Addition	
NAME			4. 2	NAME							
STREET ACORESS			4.3 (STREET	ADDRESS						
CITY - ST - ZIP					S1 - ZIP						
TITLE		☐ DELETE	5.1	TITLE					Change	Addition	
NAME			5.21	NAME		•					
STREET AUDRESS			5.33	STREET	ADDRESS						
CITY - \$1 - ZIP			5.4 (CITY-5	ST - ZIP						
TITLE		☐ DELETE	61	TITLE					☐ Change	Addition	
NAME			621	NAME							
STREET ADDRESS			63:	STREET	ADDRESS						
CITY - ST - 71P			641	CITY-S	ST-ZIP						
14 Ldo bred	by certify that the information supplied	ied with this filing does not qu	inlife for the	0.000	motion state	ed in S	ection 119.07(3)(i), Florida Statute	s. I furth	er certify that	the	
informatic Lam an o	or training and the morning of supplied in indicated on the annual report of the corporal or t	supplemental annual report or the receiver or trustee emp	is true and powered to	exec	urate and tha cute this repo	at my s ort as r	signature shall have the same lega required by Chapter 607, Florida S	ai effect a Statutes;	is if made un and that my i	ider oath; that name	

o Prone # 0283437

FILED

Jan 14 1997 8:00am

Secretary of State

H KRANKAN KA NOMBA KAKA BANK BAKK BANK BANK BANK BANG BANG KAKAN MAN KAN