FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

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

APPROVED AND FILED

95 MAY -1 AM 11:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000013931 (8)

1. Entity Name

LEBO ENTERPRISES OF FT. LAUDERDALE, INC.

Principal Office

7071 WEST COMMERCIAL BLVD.
SUITE 28
TAMARAC FL 33319

Mailing Address

7071 WEST COMMERCIAL BLVD.
SUITE 28
TAMARAC FL 33319

3. Date Incorporated or Qualified: 02/16/1994

3a. Date of Last Report: N/A

2. Principal Office Address
21

2a. Mailing Address
26

4. FEI Number: 65-0481379 ☐ Applied For ☐ Not Applicable

Suite, Apt. #
22

Suite, Apt. # etc.
27

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

City
23

City, & State
28

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

State
24

County
25

Zip
29

Country
30

8. This corporation has actually transacted business in Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

WASZAK, JOANNE
13432 LISA DR
HUDSON FL 34667

10. Name and Address of New Registered Agent

81 Name

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

83

84 City FL 85 Zip Code

11. Pursuant to the provisions of Section 607.0502 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 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
Title	President	Title	☐ Change ☐ Addition
Name	Robert Waszak	Name	
Address	6195A Pine Tree Lane	Address	
City-St-Zip	Tamarac, FL 33319	City-St-Zip	
Title	Vice President	Title	☐ Change ☐ Addition
Name	Leah Waszak	Name	
Address	6195A Pine Tree Lane	Address	
City-St-Zip	Tamarac, FL 33319	City-St-Zip	
Title		Title	☐ Change ☐ Addition
Name		Name	
Address		Address	
City-St-Zip		City-St-Zip	
Title		Title	☐ Change ☐ Addition
Name		Name	
Address		Address	
City-St-Zip		City-St-Zip	
Title		Title	☐ Change ☐ Addition
Name		Name	
Address		Address	
City-St-Zip		City-St-Zip	
Title		Title	☐ Change ☐ Addition
Name		Name	
Address		Address	
City-St-Zip		City-St-Zip	

14. I hereby certify that the information supplied with this filing is true and accurate and that my electronic 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 above, or on an attachment with an address.

SIGNATURE: X Robert D. Waszak X ROBERT D. WASZAK X 4-24-95 X (305) 720-1080

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone Number

0288890 CP