

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA
Department of State
CORPORATION DIVISION

APPROVED
AND
FILED

95 APR 25 AM 6:45

DOCUMENT # P94000032036

LEHR ENTERPRISES, INC

TALLAHASSEE, FLORIDA

4-27-94
4-27-94
4-27-94

DO NOT WRITE IN THIS SPACE

3. Date incorporated or created 4-27-94 3a. Date of Last Report N/A

4. FEI Number 65-048 7936 Approved Fee Not Applicable

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

6. Election Campaign Financing \$5.00 May Be Added to Fees

8. The corporation has liability for taxable tax under 5-199142 Florida Statutes Yes No

2. Principal Office of Business 21. 350 COCOANUT ROW 26. 350 COCOANUT ROW

22. City & State 23. PALM BEACH, FL 27. City & State 28. PALM BEACH, FL

24. 33480 25. USA 29. 33480 30. USA

9. Name and Address of Current Registered Agent

LOUIS A. LEHR, JR
350, COCOANUT ROW
PALM BEACH, FL 33480

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 FL

11. Pursuant to the provisions of Sections 607.3607 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 understand the provisions of Sections 607.3607 Florida Statutes.

SIGNATURE

Signature of Registered Agent or Secretary of the Corporation

4-10-95

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1995	
NAME	LOUIS A. LEHR, JR 350 COCOANUT ROW PALM BEACH, FL	NAME	
STREET ADDRESS		STREET ADDRESS	
CITY		CITY	
STATE		STATE	
ZIP CODE		ZIP CODE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY		CITY	
STATE		STATE	
ZIP CODE		ZIP CODE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY		CITY	
STATE		STATE	
ZIP CODE		ZIP CODE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY		CITY	
STATE		STATE	
ZIP CODE		ZIP CODE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY		CITY	
STATE		STATE	
ZIP CODE		ZIP CODE	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and is true and equally for the corporation's stated in the last 12 months. I further certify that the information is submitted in the annual report or supplemental annual report as true and accurate and that my corporation shall have the same kept on file and made available to the public. I am familiar with the provisions of the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and understand the provisions of Sections 607.3607 Florida Statutes.

SIGNATURE:

LOUIS A. LEHR, JR
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-10-95 (407)655-1140