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PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 13, 1999 8:00 am  
Secretary of State

04-13-1999 90009 029 \*\*\*150.00

DOCUMENT # P94000057259 ✓

1. Corporation Name

LEF INVESTMENTS, INC.

Principal Place of Business

2601 So. Bayshore Dr.  
19th Floor  
Miami, FL 33133

Mailing Address

2601 So. Bayshore Dr.  
19th Floor  
Miami, FL 33133

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
08/01/1994

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

4. FEI Number

65-0511068

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

COBER CORPORATE AGENTS, INC.  
2601 South Bayshore Drive  
19th Floor  
Miami, FL 33133

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 Sections 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME COHEN, JEFFREY M

STREET ADDRESS 2601 S. Bayshore Dr., 19th Fl.

CITY-ST-ZIP Miami, FL 33133

TITLE PD ☐ DELETE

NAME BERKE, MICHAEL A.

STREET ADDRESS 2601 S. Bayshore Dr., 19th Fl.

CITY-ST-ZIP Miami, FL 33133

TITLE SD ☐ DELETE

NAME BERNSTEIN, RICHARD N

STREET ADDRESS 2601 S. Bayshore Dr., 19th Fl.

CITY-ST-ZIP Miami, FL 33133

TITLE D ☐ DELETE

NAME KONDELL, KAREN P

STREET ADDRESS 2601 S. Bayshore Dr., 19th Fl.

CITY-ST-ZIP Miami, FL 33133

TITLE D ☐ DELETE

NAME BRODIE, STEVEN J

STREET ADDRESS 2601 S. Bayshore Dr., 19th Fl.

CITY-ST-ZIP Miami, FL 33133

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D ☒ Change ☐ Addition

1.2 NAME Cohen, Jeffrey Michael

1.3 STREET ADDRESS 2601 S. Bayshore Dr., 19th Fl.

1.4 CITY-ST-ZIP Miami, FL 33133

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or 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 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

RICHARD N. BERNSTEIN SECRETARY

4/1/99

Date

(305) 854-5900

Daytime Phone #

CR2E034 (11/98)