FILE NOW: FILING FEE AFTER MAY 1 IS $15.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **P94000076609 (4)**

1. Corporation Name
LEN & NANCI, INC.

Principal Place of Business
7460 PINEWALK DRIVE SOUTH
MARGATE FL 33063

Mailing Address
7460 PINEWALK DRIVE SOUTH
MARGATE FL 33063

3. Date Incorporated or Qualified: **10/18/1994**
3a. Date of Last Report: **04/19/1995**

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

4. FEI Number: **65-0529121** — 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 has liability for intangible tax under s. 199.032, Florida Statutes ☑ Yes ☐ No

9. Name and Address of Current Registered Agent

MORGENBESSER, LEONARD
7460 PINEWALK DRIVE SOUTH
BUILDING 1, #2
MARGATE FL 33063

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 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's signature required when resigning) DATE

12. OFFICERS AND DIRECTORS

TITLE	DP ☐ DELETE
NAME	MORGENBESSER, LEN
STREET ADDRESS	7460 PINEWALK DRIVE SOUTH
CITY-ST-ZIP	MARGATE FL 33063
TITLE	DVST ☐ DELETE
NAME	MORGENBESSER, NANCI
STREET ADDRESS	7460 PINEWALK DRIVE SOUTH
CITY-ST-ZIP	MARGATE FL 33063
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
	☐ Change ☐ Addition
STREET ADDRESS	
CITY-ST-ZIP	
	☐ Change ☐ Addition
STREET ADDRESS	
CITY-ST-ZIP	
	☐ Change ☐ Addition
STREET ADDRESS	
CITY-ST-ZIP	
	☐ Change ☐ Addition
STREET ADDRESS	
CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily [illegible] not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental [illegible] 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 empl[illegible] 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.

SIGNATURE: Leonard Morgenbesser LEON MORGENBESSER 3/25/96 (954) 346-1690
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIR Date Daytime Phone #

CR2E034 (12/95)