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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Feb 22, 1999 8:00 am Secretary of State

02-22-1999 90083 015 ***150.00

DOCUMENT # P9400076609 1. Corporation Name				
LEN & NANCI, INC.				
LLINGIN	ANOI, INC.			E SERVIREN ING COLOR BROW CRUE DOWN ROUN 180121 (COM CHINO CHIN BAHA 1911) LETT
Principal Place	of Business	Mailing Address	····	
7460 PINEWALK DRIVE SOUTH 7460 PINEWALK DRIVE SOUTH				
MARGATE FL 33063 MARGATE FL 33063				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
				DO NOT WRITE IN THIS SPACE
ì				Date Incorporated or Qualifed 10/18/1994
2. Principal Pl	ace of Business	2a. Mailing Address	north n	4. FEI Number Applied For
	N.W. 28th PLACE	26 6810 N.W	. 28 - PL	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired \$8.75 Additional Fee Required
City & State		City & State		
	GATE FLORIDA		ELDOLDA	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	28 MARGATE,	Country	This corporation owes the current year Intangible
24 7336	163 ES BROWARD	29 33063 3	7 7 200 100	
24	9. Name and Address of Current	<u> </u>	10.000,	10. Name and Address of New Registered Agent
	_		81 Name	LEONARD MORGENBESSER
	GENBESSER, LEONARD		82 Street	t Address (P.O. Box Number is Not Acceptable)
			6810 N.W. 28 DLACE	
BUILDING 1, #2				
MAR	GATE FL 33063		84 City	85 Zip Code
}				MARKATE FL 33063
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		ESSER PRESIDEN	T Leono	ref Norgentesser 1/7/99
	Signature, typed or printed name of registered agent		egistered Adent signature o	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	OFFICERS AND	DELETE	13.	Change Addition
1	-·		1.2 NAME	I ZONDED MORGENBESSER
NAME STREET ADDRESS	MORGENBESSER, LEN 7460 PINEWALK DRIVE SOUTH		1.3 STREET ADDRESS	1 /o. At all 7.875 Viace
	MARGATE FL 33063		1.4 C/TY-ST-ZIP	MARGATE, FLORIDA 33063
CITY-ST-ZIP	DVST	☐ DELETE	2.1 TITLE	OVIT Change Addition
NAME	MORGENBESSER, NANCI		2.2 NAME	
STREET ADDRESS	7460 PINEWALK DRIVE SOUTH		2.3 STREET ADDRESS	MORGENBESSER, WANGI
CITY-ST-ZIP	MARGATE FL 33063		2. 4 CITY-ST-ZIP	MARGATE FLORIDA 33063
TITLE	WATER TE COOKS	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	3
CITY-ST-ZIP			3.4. CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	Change Addition
NAME			4. 2 NAME	·
STREET ADDRESS			4.3 STREET ADDRESS	6 <u> </u>
CITY-ST-ZIP			4.4 CITY+ST-ZiP	
TILE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	S
CITY-ST-ZIP		□ SECET#	5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE	i	☐ DELETE		☐ Change ☐ Addition
NAME			6.2 NAME	,
STREET ADDRESS			6.3 STREET ADDRESS	

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:

954 346 1690