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 APR 26 PM 2:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000077065 (8)**

1. Corporation Name
L & A ACCOUNTING SERVICES, INC.

Principal Place of Business	Mailing Address
13438 WILLIAM MEYER COURT PALM BEACH GARDENS FL 33410	13438 WILLIAM MEYER COURT PALM BEACH GARDENS FL 33410

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 10/18/1994
3a. Date of Last Report:

2. Principal Place of Business	2a. Mailing Address
21 11000 Prosperity Farms Rd.	26 11000 Prosperity Farms Rd.
Suite, Apt. #, etc. 22 Suite 104	Suite, Apt. #, etc. 27 Suite 104
City & State 23 Palm Beach Gardens, Fl	City & State 28 Palm Beach Gardens, Fl
Zip / Country 24 Fl 33410 25 Palm Bch	Zip / Country 29 33 410 30 Palm Bch

4. FEI Number: 65-0565936 — ☐ 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

LEONE, PHILIP E
901 NORTHPOINT PARKWAY SUITE 310
WEST PALM BEACH FL 33407

10. Name and Address of New Registered Agent

81 Name: Philip E. Leone
82 Street Address (P.O. Box Number is Not Acceptable): 11000 Prosperity Farms Rd. - Ste 104
83
84 City: Palm Beach Gardens FL 85 Zip Code: 33410

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: Philip E. Leone — 4/20/95
Signature, typed or printed name of Registered Agent and date of signature. (NOTE: Registered Agent signature required when mandated.) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	11 TITLE	President/Owner ☑ Change ☐ Addition
NAME	LEONE, DOROTHY R	12 NAME	Dorothy R. Leone
STREET ADDRESS	13438 WILLIAM MEYER COURT	13 STREET ADDRESS	11000 Prosperity Farms Road, Suite 104
CITY-ST-ZIP	PALM BEACH GARDENS FL 33410	14 CITY-ST-ZIP	Palm Beach Gardens, Fl 33410
TITLE		21 TITLE	☐ Change ☐ Addition
NAME		22 NAME	
STREET ADDRESS		23 STREET ADDRESS	
CITY-ST-ZIP		24 CITY-ST-ZIP	
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 my address.

SIGNATURE: Dorothy R. Leone — 4-20-95 — 407-626-8876
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0250481 CP