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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # P9400090118 (8)

Corporation Name	1 0400000110	(0)
LE LEDOZEN DEGG	EDTC INC	

Principal Place of Business Mailing Address 101491 OVERSEAS HIGHWAY 101491 OVERSEAS HIGHWAY KEY LARGO FL 33037 KEY LARGO FL 33037 3a. Date of Last Report 3. Date Incorporated or Qualified 12/12/1994 05/01/1995 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 65-0542130 21 101491 Overseas 26 Same Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional Certificate of Status Desired 22 Fee Required City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 Added to Fees 28 Country This corporation has liability for intangible tax under s. 199,032, monroe Yes No 29 30 Florida Statutes 25 Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ARONOFSKY, IRWIN 82 Street Address (P.O. Box Number is Not Acceptable) 101491 OVERSEAS HIGHWAY 83 KEY LARGO FL 33037 84 City Zip Code 85 7.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am 0505, Elerida Statutes. 11. Pursuant to the p or registered agent SIGNATURE (NOTE: Registered Agent signature (12/95)FFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 13. DELETE ☐ Change Addition 7 TLF 1 1 TITLE ARONOFSKY, IRWIN CR2E034 1.2 NAME NAME 101491 OVERSEAS HIGHWAY STREET ADDRESS 1.3 STREET ADDRESS KEY LARGO FL 33037 140 TY-ST-ZP 0:1Y - S1 - Z-P [] DELFTE Change Addition n 2 1 TITLE TITLE ARONOFSKY, JILL NAME 2.2 NAME 101491 OVERSEAS HIGHWAY STREET ADDRESS 2.3 STREET ADDRESS KEY LARGO FL 33037 2 4 CITY - S! - ZIP CFY-ST-ZIP DELETE Change Addition TITLE 3 1 TITLE NAME 3.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 3.4 CITY - S1 - 7(2) DELETE Change Addition 11116 4 1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - \$1- ZIP DELETE ☐ Change Addition 5 1 TOLE TIFLE NAME 5.2 NAME STHEE! ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST - 7iP CITY - S1 - ZIE DELETE 1HLF 6 1 TIFLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP COTY - ST- 7IP

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)(k), 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 early 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 exaction with an address.

SIGNATURE: Sul Wirwfol

4/9/96 (305)453-095