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

P97000018859 DOCUMENT

1. Corporation Name

L&E ENT	ERPRISE	S UNLIMITED, 1	NC.									
Principal Place	of Business		M	Mailing Address) (40)(40) (10) 18311 30011 00111 00111 00111 00111 11001 1	######################################	(118 1911 188)	
4860 N.W. 9TH TERRACE				4860 N.W. 9TH TERRACE								
FT LAUDERDALE FL 33309 FT LAUDERDALE FI												
									DO NOT WRITE IN THIS SPACE			
									3. Date Incorporated or Qualifed			
									02/24/1997			
2. Principal Place of Business				2a. Mailing Address					4. FEI Number		lied For	
21				26					65-0732707		Applicable	
Suite, Apt. #, etc.				Suite, Apt. #, etc.					5. Certificate of Status Desired	8.75 Ac Fee Req		
City & State				City & State					6. Election Campaign Financing	5.00 N	fay Be	
23				28					Trust Fund Contribution	Added to	Fees	
Zip Country				Zip Cour			Country		8. This corporation owes the current year Intangible			
24	25		29	2930					Personal Property Tax. Yes No			
	9. Name	and Address of Cur	rent Regis	stered Agent		L.,			10. Name and Address of New Registered Ager	<u>ot</u>		
						81	Name					
Gonzalez, Edgar J 4860 n.w. 9th Terrace							Street	Addres	dress (P.O. Box Number is Not Acceptable)			
FT LAUDERDALE FL 33309				,								
TI ENODEMBRIE I C 30003												
							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 of office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or private name of registered agent and title it applicable. (NOTE: Registered Agent signature required when reinstating)									4/19/99	nt as regi	stered	
12.		OFFICERS	AND DIRE	/ 1	13.				ADDITIONS/CHANGES TO OFFICERS AND DI	RECTOR	RS IN 12	
TITLE	PD			DELETE	1.1 T	1.1 TITLE		T	· 0	Change	☐ Addition	
NAME				AME								
STREET ADDRESS	AGOS MINE OTH TERRACE					1.3 STREET ADDRESS		. [ł	
CITY-ST-ZIP	ET LAUDEDDALE EL 00000					1.4 CITY-ST-ZIP		1				
TITLE	TODE TE COOK			☐ DELETE		2,1 TITLE		 		Change	☐ Addition	
				_		2.2 NAME		ļ			}	
NAME							2.3 STREET ADDRESS					
STREET ADDRESS			٠,.	e garage de la companya de la compa		2, 4 CITY-ST-ZIP						
CITY-ST-ZIP	 -			☐ DELETE	_	3.1 TITLE		 		Change	☐ Addition	
NAME				3.2 N		AME		1			1	
STREET ADDRESS	 						T ADDRESS					
		···										
CITY-ST-ZIP				[] DELETE		3.4. CITY-ST-ZIP 4.1 TITLE		_		Change	☐ Addition	
NAME	•			_		4. 2 NAME					ţ	
	STREET ADDRESS						TADDRESS		•			
•											Ì	
CITY-ST-ZIP TITLE	ST-ZIP			☐ DELETE		4.4 CITY-ST-ZIP 5.1 TITLE		+-		Change	Addition	
					5.2 NAME				_	-		
NAME							T ADDRESS	,			Ì	
STREET ADDRESS						ITY-S		1				
CITY-ST-ZIP				☐ DELETE		6.1 TITLE		+		Change	Addition	
TITLE					6.2 N	AME		-	_	-		

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

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.

FILED Apr 22, 1999 8:00 am Secretary of State 04-22-1999 90183 037 ***150.00