2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P97000064142 **DOCUMENT #**

1. Entity Name

LENMART INTERNATIONAL INC.



FILED Jan 24, 2003 8:00 am Secretary of State

01-24-2003 90060 021 ***150.00

MARTINEZ, LENNY 12190 NW 98TH AVE, BAY #6 MIAMI FL 33018 TITLE MAKE TITLE MAKE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE MAKE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE MAKE STREET ADDRESS CITY-ST-ZIP TITLE MAKE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TI		·				
Sulfe, Apt. #, etc. Sulfe, Apt. #, etc. Chy & State	12190 NW 98TH AVE 12190 NW 98TH A BAY #6 BAY #6					
City & State City & State City & State City & State A. FPI Number 65-0772047 Application A. FPI Number 65-0772047 Application S. Name and Address of Current Registered Agent MARTINEZ, LENNY 12190 NW 99TH AVE BAY #6 MAMI FIL. 30318 City FL Zip Code 8. The above named entity submits mis statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am item/ar with, and accept the deligations of registered agent. SIGNATURE FILE NOW!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 After May 1, 2003 Fee will be \$550.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State 10. FPICETS AND DIRECTORS 11. ADDITIONS/CHANGES TO OPPICERS AND DIRECTORS 12. Deeter 13. ADDITIONS/CHANGES TO OPPICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OPPICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OPPICERS AND DIRECTORS 14. OPPICERS AND DIRECTORS 15. ADDITIONS/CHANGES TO OPPICERS AND DIRECTORS 16. TO ST. 20 17. ADDITIONS/CHANGES TO OPPICERS AND DIRECTORS 17	2. Principal F	Place of Business	3. Mailing Address			
S. Name and Address of Current Registered Agent S. Name and Address of Current Registered Agent MARTINEZ, LENNY 12190 NW 98TH AVE BAY #6 MAM IF 33018 City FLE NOW!!! FEE IS \$150.00 After May, 1,2003 Fee with a 5550.00 Make Check Payable to Florida Department of State 1. ADDITIONIS/CHANGES TO OFFICERS AND DIRECTORS 1. ADD	Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES	
S. Name and Address of Current Registered Agent S. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent 7. Name and Address of New Registered Agent 7. Name and Address of New Registered Agent 8. The Address (P.O. Box Number is Not Acceptable) 8. The Address (P.O. Box Number is Not Acceptable) 8. The Address (P.O. Box Number is Not Acceptable) 8. The Address (P.O. Box Number is Not Acceptable) 8. The Address (P.O. Box Number is Not Acceptable) 8. The Address (P.O. Box Number is Not Acceptable) 8. The Address (P.O. Box Number is Not Acceptable) 8. The Address (P.O. Box Number is Not Acceptable) 8. The Address (P.O. Box Number is Not Acceptable) 8. The Address (P.O. Box Number is Not Acceptable) 8. Election Carreng in Financing 9. Election Carreng in Financing 10. The Address (P.O. Box Number is Not Acceptable) 9. Election Carreng in Financing 10. The Address (P.O. Box Number is Not Acceptable) 10. The Address (P.O. Box	City & State		City & State		4. FEI Number 65-0772047	
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MARTINEZ, LENNY 12/190 NW 98TH AVE BAY #6 MIAMI FL 33018 City FL Zip Code 6. The above named entity submits this statement for the purpose of changing its registered effice or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent and rich is applicable. FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 THE MARK MARTINEZ LENNY MARTINE		6. Name and Address of Current	Registered Agent		7. Name and Address of New Registered Ag	jent
MIAMI FL 33018 City FL Zip Code 8. The above remed entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE SIGNATURE SISO.00 Signature typed or printed name of registered agent and rifer sport code. (nOTE Registered Agent signature recursed when remeting) DATE	12190 NW				(P.O. Box Number is Not Acceptable)	
the obligations of registered agent. Signature Signature Signature Signature (special printed correct of registered agent and title if appropriate). MOTE Registered Agent signature reculted when reindation) DATE		33018		City	FL	Zip Code
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