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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000096025 (6)

LENNY & VINNY'S EHRLICH Principal Place of Business	ROAD, INC. Mailing Address				
8403 BENJAMIN ROAD	8403 BENJAMIN ROAD			DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified	
SUITE A TAMPA FL 33634	SUITE A				
IAMPA PL 33034	TAMPA FL 33634				
				11/10/1997	
Principal Place of Business	2a. Mailing Address			4. FEI Number Applied For	
BYOL BENJANIN	RD 26 8405 BENS	TAMI	IN RO	59-3477953 Not Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, etc. 27 SUITE J			Certificate of Status Desired	
City & State TAM PA FL	City & State	FL		8. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip Country 25 V.S	20 33634	Gounti	کی	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	
	Current Registered Agent			10, Name and Address of New Registered Agent	
HANEY, R. REID	NO CHANGE	8.	1 Name		
101 E KENNEDY BIVE		8:	82 Street Address (P.O. Box Number is Not Acceptable)		
TAMP/ 11. 33602		8:	3		
		84	4 City	FL 85 Zip Code	
 Pursuant to the provisions of Sections office or registered agent, or both, in the agent. I am familiar with, and accept the SIGNATURE 	607 0502 and 607.1508, Florida Statute he State of Florida Such change was a he obligations of, Section 607.0505, Flor	s, the about thorized by rida Statute	ve-named by the corp es.	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered	
Signature, typed or printed name of reg			gent signature	required when reinstating) DATE	
IZ. OFFICI	ERS AND DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
IAME SAMSON, PAUL L	_ out	1.7 TILE		Oldings Modulus	
TREET ADDRESS 3405 BENJAMIN ROAD	STE J	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ET ADDRESS		
TAMPA FL 33634	• • • • • • • • • • • • • • • • • • • •		· ST · ZIP		
ITLE	DELETE 21			Change Addition	
IAME		2 2 NAME	:		
STREET ADDRESS		2.3 STREE	ET ADDRESS		
CITY-ST-ZIP		2. 4 CITY	-ST-ZIP		
TITLE	DELETE	3.1 TITLE		Change Addition	

STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 14. I hereby certify that the informindicated on this annual rock officer or director of the colon Block 12 or Block 13 if chairs tion 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 or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an item or provider of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in a content of the true of the content of

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

44 CITY-ST-ZIP

3.4. CITY-ST-ZIP

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

DELETE

SIGNATURE:

STREET ADDRESS

CITY - ST- ZIP

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

NAME

TITLE

NAME

PAUL L SAMSON

FILED

May 13 1998 8:00am

Secretary of State

Change

Change

☐ Change

Addition

Addition

Addition