Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90024 034 ***150.00

O KRIMINTON KIO NEKIK KORKI ORIKI OLIMI BENIN BOLOR KIDIK BUKAN KUNDA BIKIN KORTA DIKAN BUTAN BARIN BIRI BARIN

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

DOCUMENT # P97000108674

1. Corporation Name

NAME

STREET ADDRESS

CITY-\$T-ZIP

LEFT LANE, INC.

Principal Plac	e of Business	Mailing Address			#E:87 (0118 BILL 1884) E:47 1891	
2200 NE 33RD	AVE	2200 NE 33RD AVE				
SUITE 15C FT. LAUDERDA	F FL 23305	Suite 150 Ft. Lauderdale Fl. 33305		DO NOT WRITE IN THIS	SPACE	
US US			3. Date Incorporated or Qualifed			
				12/30/1997	•	
2. Principal P	lace of Business	2a, Mailing Address	·	4. FEI Number	Applied For	
21 5113	N.W-66th-Ave	26		65-0817217	= Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional	
22		27		5. Verticate of Outdo Desired	Fee Required	
City & Stat	_	City & State		6, Election Campaign Financing	\$5.00 May Be	
	erhu fl	28		Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes the current year in	ltangible ☐Yes X No	
24 333		29 30	<u> </u>	Personal Property Tax. 10. Name and Address of New Registered		
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Registered	Agent	
TYN	ESKI, FRANK M		J. Hame		·	
	N.E. 33RD AVENUE, SUITE 15C		82 Street	Address (P.O. Box Number is Not Acceptable)		
	AUDERDALE FL 33305		83			
			84 City	FI	85 Zip Code	
44 Durauant	to the provisions of Sections 607 0502	and 607 1508 Florida Statutes	the above-named		f changing its registered	
office or r	egistered agent, or both, in the State o	f Florida. Such change was auth	orized by the corpo	corporation submits this statement for the purpose of oration's board of directors. I hereby accept the appo	intment as registered	
agent. I a	m familiar with, and accept the obligation			-ari) 1/20	190	
SIGNATURE	Signature, typed or printed same of registered agent	and title if applicable. (NOTE: Re	egistered Agent signature re	aguired when reinstating) DATE		
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12	
TITLE	DO	☐ DELETE	1.1 TITLE	Do	Change	
NAME	TYNESKI, FRANK M		1.2 NAME .	TYNESKI, FRANK M	1	
STREET ADDRESS	2200 NE 33RD AVE (18F)				ì	
CITY-ST-ZIP	FT. LAUDERDALE FL 33305		1.3 STREET ADDRESS	SILE NW 66 TH AVE.		
TITLE			1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	5113 NW 66 TH AVE.		
		☐ DELETÉ		GILS NW 66 TH AVE.	☐ Change ☐ Addition	
NAME		□ DELETE	1.4 CITY-ST-ZIP	GILS NW 66 TH AVE.	☐ Change ☐ Addition	
STREET ADDRESS		□ OELETE	1.4 CITY-ST-ZIP 2.1 TITLE	GILS NW 66 TH AVE.	Change Addition	
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14. 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.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP