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SECRETARY OF STATE TAREBAHASSEE, FLORIDA

/T # P-98000045765 ******* 1. Entity Name

LION OF ODESSA INCORPORATED

Principal Place of Business

Mailing Address

3. Mailing Address

10326 BUENA VENTURA DRIVE BOCA - RATON FLORIDA

33498-6710 2. Principal Place of Business

BOCA RATON FLORIDA		10326 BUENA VENTURA DRV						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE				
City & State City & State					4. FEI Number	I A	pplied For	
	RATON FLORIDA		BOCA RATON FLORIDA		* 65-0837544 ***		ot Applicable	
Zip 33498-		33498-6710	PALM BE	ACH	5. Certificate of Status Desired	\$8.75 Ad Fee Require	ditional ed	
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent			
				RICH	RICHARD L FREEDMAN ATTY AT LAW			
10326 BUENA VENTURA DRIVE				Street Address (P.O. Box Number is Not Acceptable) 2101 WEST COMMERCIAL BLVD				
BOCA RATON FLORIDA 33498-6710				## SUITE# 5400				
City				₹ Zin Code				
					<u> </u>	333	109	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.								
Richard Z. Freedman 3/23/00								
SIGNATURE								
9. This corporation is eligible to satisfy its Intangible FILE NOWILL FEE IS \$150.00								
Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be					 10. Election Campaign Financing Trust Fund Contribution. 		0 May Be d to Fees	
(See criteria on back) Make Check Payable to Department of State								
11.	president secret		12.		ADDITIONS/CHANGES TO OFFICERS			
TITLE NAME	treasure directo		NAME	1		☐ Change	☐ Addition	
STREET ADDRESS	lennard feldman	≛	STREET ADDRESS		00000010	C120.	o	
CITY-ST-ZIP	10326 buena vent	ura drv	CITY-ST-ZIP		80000319 -04/04/00-			
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TITLE		☐ Delete	TITLE	1		Change	☐ Addition	

NAME

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cute this re

REET ADDRESS

TY-ST-ZIP

SIGNATURE: LENNARD FELDMAN

NAME

STREET ADDRESS

CITY-ST-ZIP

I hereby certify that the information supplied with this filing of indicated on this report or supplemental report is true and a

of the corporation or the receiver or trustee empowered to changed, or on an attachment with an address, with all other

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

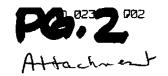
FEBUARY 24th 2000* Date

otion stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information is shall have the same legal effect as if made under oath; that I am an officer or director I by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

Daytime Phone #



4 163



LION OF ODESSA INCORPORATED 10326 BUENA VENTURA DRIVE BOCA RATON, FLORIDA 33498-6710

February 24, 2000

Department of State
Division of Corporations —
Reinstatement Section
P.O. Box 6327
Tallahassee, FL 32314

Re: Lion of Odessa, Inc., EIN 65-0837544

Document # P98000045765

Gentlemen:

As the owner and sole director of the above referenced corporation, I am writing you to request reinstatement of this corporation. I am requesting a one-time waiver of any reinstatement fees for 1999 based upon the following reasons. I moved my corporate location during 1998. The 1999 Annual Report was never forwarded to my new address, and I therefore never received it. This is the first time I have ever owned and operated a corporation, and I was not aware of this annual filing requirement. I would have filed the Annual Report if it had been forwarded to me, but that was not the case. My accountant has since brought the annual filing requirement to my attention. I will file the Uniform Business Reports for future years in a timely manner (on or before May 1).

I have enclosed a completed 2000 Uniform Business Report, along with a check for \$300 payable to the Department of State representing the annual fee for the years 1999 and 2000. Based upon the above information, please reinstate my corporation and grant me the one-time waiver of reinstatement fees. Thank you in advance for your cooperation.

Sincerety

Lennard Feldman

Enclosures