

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

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DOCUMENT # P99000022966

1. Entity Name

Lenner Enterprises, Inc.

FILED

02 OCT 29 PM 5:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

600 N. Pine Island Rd.

3. Mailing Address

600 N. Pine Island Rd.

Suite, Apt. #, etc.

Suite 450

Suite, Apt. #, etc.

Suite 450

City & State

Plantation, FL

City & State

Plantation, FL

Zip

33324

Country

US

Zip

33324

Country

US

4. FEI Number

59-3569530

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Keith J. Kanouse

Street Address (P.O. Box Number is Not Acceptable)

One Boca Place, Suite 324 Atrium

2255 GLADES ROAD

City

Boca Raton

FL

Zip Code

33431

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.

SIGNATURE

Keith J. Kanouse

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

10-23-02

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	<i>Director and President</i>
NAME	<i>Edna L. Lenner</i>
STREET ADDRESS	<i>936 Intra coastal Drive</i>
CITY-ST-ZIP	<i>Fort Lauderdale, FL 33304</i>
TITLE	
NAME	
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4000008680064
10/29/02-01130-014 **150.00

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IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)

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LENNER ENTERPRISES, INC.
600 NORTH PINE ISLAND ROAD SUITE 450
PLANTATION, FLORIDA 33324
PHONE: 954 315-0200 FAX: 954 315-0280

October 28, 2002

Department of State
Division of Corporations

Dear Department of Corporations:

Here is a copy of my Uniform Business Report forms for
Lenner Enterprises, Inc.. along with a check for \$150.00.

I never received the original forms.

Thank you for your assistance.

Sincerely,



Edward Lenner
President
Lenner Enterprises, Inc.
59-3569530