

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**

**Apr 19, 2001 8:00 am**  
**Secretary of State**

04-19-2001 90018 013 \*\*\*150.00

**DOCUMENT # P99000024722**

1. Entity Name  
**LE'ANN DESIGNS, INC.**

Principal Place of Business

Mailing Address

**3200 NW 46TH ST., #201  
FT. LAUDERDALE FL 33309**

**3200 NW 46TH ST., #201  
FT. LAUDERDALE FL 33309**

**949938**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

**4123 N State Rd 7**  
Suite, Apt. #, etc.

**4123 N State Rd 7**  
Suite, Apt. #, etc.

City & State

City & State

**Laurelville Lakes**

**Laurelville Lakes**

4. FEI Number **65-0904377**

Applied For  
Not Applicable

Zip

Country

Zip

Country

**33319**

**FL**

**33319**

**FL**

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**WHYTE, SONIA  
3200 NW 46TH ST., #201  
FT. LAUDERDALE FL 33309**

Name

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

City

**FL**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete  
NAME **D**  
STREET ADDRESS **WHYTE, SONIA**  
CITY-ST-ZIP **3200 NW 46TH ST., #201  
FT. LAUDERDALE FL 33309**

TITLE ☐ Change ☒ Addition  
NAME **D**  
STREET ADDRESS **DACRES Patricia**  
CITY-ST-ZIP **6921 45 Street  
Laurelville 33319**

TITLE ☐ Delete  
NAME **D**  
STREET ADDRESS **DYER, KERRYANN**  
CITY-ST-ZIP **3200 NW 46TH ST., #201  
FT. LAUDERDALE FL 33309**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. I 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 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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **S Whyte Sonia Whyte**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**March 10 2001 9547172868**  
Date Daytime Phone #

CR2E034 (10/00)