2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P99000026109** Apr 27, 2000 8:00 am Secretary of State LEADING EDGE BUSINESS SERVICES II, INC. 04-27-2000 90026 042 ***158.75 Principal Place of Business Mailing Address 831 SW 10TH STREET 831 SW 10TH STREET FT. LAUDERDALE FL 33315-1223 FT. LAUDERDALE FL 33315 3. Mailing Address 2. Principal Place of Business 600 SW 4th 600 SW 4th Avenue Suite, Apt. #, etc. Suite opt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State 4. FEI Number City & State 65-0923823 Not Applicable Ft. Lauderdale, <u>Ft. Lauderdale. FL</u> Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 33315 33315 USA USA 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Jonathan E. Jones LEVY, JEFFREY B Street Address (P.C. Box Number is Not Acceptable) 831 SW 10th Street 100 SE 6TH STREET FT. LAUDERDALE FL 33301 Zip Code Ft. Lauderdale 33315 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. NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) П Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ☐ Change ☐ Addition TITLE Delete V.Joannda Jones NAME NAME President STREET ADDRESS STREET ADDRESS 831 SW 10th Street CITY-ST-ZIP CITY-ST-7IP Ft. Lauderdale, FL 33315 ☐ Addition ☐ Change TITLE TITLE Executive Vice President NAME NAME Jonathan E. Jones 831 SW 10th Street STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Ft - Lauderdale, FL 33315 Change TITLE ☐ Delete Jonathan E. Jones NAME NAME 831 SW 10th Street STREET ADDRESS STREET ADDRESS Ft. Lauderdale, FL 33315 CITY-ST-ZIP CITY-ST-ZIP Treasurer ☐ Addition ☐ Delete TITLE TITLE V. Joannda Jones NAME NAME STREET ADDRESS 831 SW 10th Street STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Ft., Lauderdale, FL 33315 ☐ Change ☐ Addition VP Marketing TITLE Delete TITLE Ramon Silton NAME NAME STREET ADDRESS STREET ADDRESS 3137 NW 68th Court CITY-ST-ZIP CITY-ST-ZIP Ft. Lauderdale, FL 33309 Change ☐ Addition ☐ Delete TITLE NAME NAME

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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/17/2000

954-367-0308

Daytime Phone #