

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S39165** (3)

1. Corporation Name
LEON HOLTZER, INC.



Principal Place of Business

**2130 S.W. 94TH TERR
FT. LAUDERDALE FL 33324**

Mailing Address

**2130 S.W. 94TH TERR
FT. LAUDERDALE FL 33324**

3. Date Incorporated or Qualified
03/20/1991

3a. Date of Last Report
04/18/1995

2. Principal Place of Business

21 **3001 S. OCEAN DR.**

2a. Mailing Address

26 **3001 S. OCEAN DR**

4. FEI Number
65-0262437

Applied For
Not Applicable

Suite, Apt. #, etc.

22 **APT # 6W**

Suite, Apt. #, etc.

27 **APT # 6W**

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

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s 199.032, Florida Statutes ☐ Yes ☐ No

City & State

23 **HOLLYWOOD, FL**

City & State

28 **HOLLYWOOD, FL**

Zip Country

24 **33019-2807** 25

Zip Country

29 **33019-2807** 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**AMIGO, FRANK, ESQ.
120 S. UNIVERSITY DR.
SUITE A
PLANTATION FL 33324**

81 Name

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

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when rein stating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PST** ☐ DELETE
NAME **HOLTZER, LEON**
STREET ADDRESS **2130 S.W. 94TH TERR**
CITY-ST-ZIP **FT. LAUDERDALE FL**

TITLE **VD** ☐ DELETE
NAME **HOLTZER, LEON**
STREET ADDRESS **2130 S.W. 94TH TERR**
CITY-ST-ZIP **FT. LAUDERDALE FL**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

**3001 S. OCEAN DR. - APT. 6W
HOLLYWOOD, FL 33019-2807**

**3001 S. OCEAN DR. - APT 6W
HOLLYWOOD, FL 33019-2807**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

LEON HOLTZER

4/15/96 305-927-8360

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)