

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

MAY - 1 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **V50925** (9)

1. Corporation Name
JEF-LEN ENTERPRISES, INC.

Principal Place of Business Mailing Address
**7648 PINEWALK DR. S.
MARGATE FL 33063
US** **7648 PINEWALK DR. S.
MARGATE FL 33063
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **07/15/1992** 3a. Date of Last Report **04/27/1994**

2. Principal Place of Business 2a. Mailing Address
JEF-LEN ENTERPRISES **JEF-LEN ENTERPRISES**

4. FEI Number **65-0461594** Applied For
Not Applicable

21. Suite, Apt. #, etc. **8990 S.R. 84** 26. Suite, Apt. #, etc. **P.O. BOX 290070**

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

22. City & State **DAVIE, FL.** 27. City & State **DAVIE, FL.**

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

23. Zip **33324** Country **USA** 28. Zip **33329-0070** Country **USA**

7. The corporation has liability for intangible tax under § 199.032 Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**NEMET, JEFFREY
2930 UNIVERSITY DR
STE 75
CORAL SPGS FL 33065**

B1 Name **NEMET, JEFFREY**
B2 Street Address (P.O. Box Number is Not Acceptable)
40 THE L J BOWER
B3 **8990 STATE ROAD 84**
B4 City **DAVIE, FL** B5 Zip Code **33324**

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: DATE: **4-27-95**

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D**
NAME **NEMET, JEFFREY**
STREET ADDRESS **7648 PINEWALK DRIVE SOUTH**
CITY ST ZIP **MARGATE FL**

11 TITLE **D** Change Addition
12 NAME **NEMET, JEFFREY**
13 STREET ADDRESS **6594 NW. 97 DRIVE**
14 CITY ST ZIP **PACKLAND, FL 33076** Change Addition

TITLE **D**
NAME **LEVENSON, LEONARD**
STREET ADDRESS **6801 BAYFRONT DR**
CITY ST ZIP **MARGATE FL**

17 NAME Change Addition
18 STREET ADDRESS
19 CITY ST ZIP Change Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

21 TITLE Change Addition
22 NAME
23 STREET ADDRESS
24 CITY ST ZIP Change Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

27 TITLE Change Addition
28 NAME
29 STREET ADDRESS
30 CITY ST ZIP Change Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

31 TITLE Change Addition
32 NAME
33 STREET ADDRESS
34 CITY ST ZIP Change Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

37 TITLE Change Addition
38 NAME
39 STREET ADDRESS
40 CITY ST ZIP Change Addition

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)(b), 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, changed, or on an attachment with an address.

SIGNATURE: SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE: **4-27-95** IDENTIFICATION NUMBER: **205-492-8337**