

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

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Northon  
Secretary of State  
Division of CORPORATIONS

APPROVED  
AND  
FILED

DOCUMENT # **P92000011033 (7)**

95 MAY -1 PM 2:35

1. Corporation Name

**LEUMI INVESTMENT CORPORATION**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

4701 JACKSON ST  
HOLLYWOOD FL 33021

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HOLLYWOOD FL 33021

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
**12/08/1992**

3a. Date of Last Report  
**06/14/1994**

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number  
**65-0382667**

Applied For  
Not Applicable

22. Suite, Apt. #, etc.

27. Suite, Apt. # etc.

5. Certificate of Status Desired

**\$8.75** Additional  
Fee Required

23. City & State

28. City & State

6. Election Campaign Financing  
Trust Fund Contribution

**\$5.00** May Be  
Added to Fees

24. Zip

25. Country

29. Zip

30. Country

8. This Corporation has liability for intangible tax under S. 199.032,  
Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**GOTTLIEB, KENNETH A  
125 N 46TH AVE  
HOLLYWOOD FL 33021**

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

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	<b>D</b>
NAME	<b>LEUMI, DOV</b>
STREET ADDRESS	<b>4701 JACKSON ST</b>
CITY, ST, ZIP	<b>HOLLYWOOD FL 33021</b>
TITLE	<b>V</b>
NAME	<b>LEUMI, MILKA</b>
STREET ADDRESS	<b>4701 JACKSON ST</b>
CITY, ST, ZIP	<b>HOLLYWOOD FL</b>
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

14. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
15. NAME	
16. STREET ADDRESS	
17. CITY, ST, ZIP	
20. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
21. NAME	
22. STREET ADDRESS	
23. CITY, ST, ZIP	
30. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
31. NAME	
32. STREET ADDRESS	
33. CITY, ST, ZIP	
40. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
41. NAME	
42. STREET ADDRESS	
43. CITY, ST, ZIP	
50. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
51. NAME	
52. STREET ADDRESS	
53. CITY, ST, ZIP	
60. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
61. NAME	
62. STREET ADDRESS	
63. CITY, ST, ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.032(4)(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 and shall indicate only that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 407, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or as an attachment with an address.

SIGNATURE:

*[Handwritten Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR