

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Apr 02 1997 8:00am
Secretary of State

PROFIT CORPORATION
 ANNUAL REPORT
1997



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

DOCUMENT # P94000062329 (5)

1. Corporation Name
LEADING BRANDS CORP.



Principal Place of Business
C/O PETER CRUZ
10700 S.W. 118TH AVVE.
MIAMI FL 33176

Mailing Address
C/O PETER CRUZ
10700 S.W. 118TH AVVE.
MIAMI FL 33176-3144

3. Date Incorporated or Qualified
08/24/1994

3a. Date of Last Report
04/12/1996

2. Principal Place of Business
 21 **15224 Sw 140 Street**
 Suite, Apt. #, etc.
 22
 City & State
 23 **MIAMI, FL**
 Zip
 24 **33196** Country
 25 **USA**

2a. Mailing Address
 26 **15224 S.W. 140 St.**
 Suite, Apt. #, etc.
 27
 City & State
 28 **MIAMI, FL**
 Zip
 29 **33196** Country
 30 **USA**

4. FEI Number
65-0517035 Applied For
 Not Applicable

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

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

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

9. Name and Address of Current Registered Agent

RINDEL, TOM PA
TWO DATRAN CENTER
9130 S. DADELAND BLVD., STE. 1225
MIAMI FL 33156-7849

10. Name and Address of New Registered Agent

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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	JD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GORDILLO, ENRIQUE	1.2 NAME	
STREET ADDRESS	8203 SW 85TH TERR.	1.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL 33148	1.4 CITY - ST - ZIP	
TITLE	JD <input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CRUZ, PETER	2.2 NAME	
STREET ADDRESS	10700 S.W. 118TH AVVE.	2.3 STREET ADDRESS	15224 SW 140 St
CITY - ST - ZIP	MIAMI FL 33176	2.4 CITY - ST - ZIP	Miami, FL 33196
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do 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 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: _____
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/3/26/97 **22599484**
 Date Daytime Phone #

CR2E034 (9/96)