

2-6-97 B- C
FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Feb 18 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 # 323190 (9)

1. Corporation Name
LEEMAX, INC.



Principal Place of Business 13605 SOUTH DIXIE HWY SUITE 131 MIAMI FL 33176-7253 US	Mailing Address 13605 S DIXIE HWY SUITE 131 MIAMI FL 33176-7252 US
---	---

3. Date Incorporated or Qualified 11/14/1967	3a. Date of Last Report 04/24/1996
--	--

2. Principal Place of Business 13615 S. DIXIE HWY	2a. Mailing Address 13615 S. DIXIE HWY
21. Suite, Apt. #, etc. SUITE # 115	26. Suite, Apt. #, etc. SUITE # 115
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	25. Country
29. Country	30. Country

4. FEI Number 59-1205530	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**TELHARD, MAX L
 54 S. BLACKWATER LANE
 KEY LARGO FL 33037**

10. Name and Address of New Registered Agent

81 Name MICHAEL TELHARD
82 Street Address (P.O. Box Number is Not Acceptable) 13615 S. DIXIE HWY # 115
83 City MIAMI
84 State FL
85 Zip Code 33176

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: *Michael Telhard* **MICHAEL TELHARD** 2/18/97
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when reinstating.) DATE.

12. OFFICERS AND DIRECTORS

TITLE PO	<input type="checkbox"/> DELETE
NAME TELHARD, MICHAEL	
STREET ADDRESS 9225 SW 99TH STREET	
CITY - ST - ZIP MIAMI FL	
TITLE VO	<input checked="" type="checkbox"/> DELETE
NAME TELHARD, DOROTHY	
STREET ADDRESS 54 S. BLACKWATER LANE	
CITY - ST - ZIP KEY LARGO FL	
TITLE STD	<input type="checkbox"/> DELETE
NAME TELHARD, MAX	
STREET ADDRESS 54 S. BLACKWATER LANE	
CITY - ST - ZIP KEY LARGO FL	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP 33176
2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP
3.1 TITLE VICE PRESIDENT
3.2 NAME
3.3 STREET ADDRESS 33037
3.4 CITY - ST - ZIP
4.1 TITLE SECRETARY / DIRECTOR
4.2 NAME WILLARE LOIS TELHARD
4.3 STREET ADDRESS 9225 SW 99ST. MIAMI FL 33176
4.4 CITY - ST - ZIP
5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP
6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME
6.3 STREET ADDRESS
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: *Michael Telhard* 1-23-97 (305) 235-9300

CR2E034 (9/96)