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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(2)

LEBACO ENTERPRISES, INC.

FILED Mar 23 1998 8:00am Secretary of State

				•			
Principal Place of Business		Mailing Address				1 19914 91918 91911 9989 1989 11911 9891 91986 91991 91911 81911 91915 91821 91	ĮI.
9763 SW 68 ST. 9763 SW							
MIAMI FL 33173 MIAMI FL 33173						DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified	
						03/12/1973	
<u>-</u>	lace of Business	2a. Mailing Address				4. FEI Number Applied F	or
21		26				59-1440818 / Not Applic	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	1			5. Certificate of Status Desired \$8.75 Addition Fee Regulred	al
City & Stat	е	City & State	City & State			6. Election Campaign Financing \$5.00 May Be	
23	-	⊢ '	28			Trust Fund Contribution Added to Fees	
Zip	Country	Zip				8. This corporation owes or has paid the current year Intangible	
24	25	29 30				Personal Property Tax due June 30. Yes No	
	9. Name and Address of Cur	rrent Registered Agent		1		10. Name and Address of New Registered Agent	
	NUMER, LEO			81	Name		
9763 SW 68 ST.				82 Street Address (P.O. Box Number is Not Acceptable)			
MA	AMI FL 33173			83			
1				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	d agent and title if applicable (NOTE: Register	red Age	nt signature require	ed when reinstating) DATE	— I
12.		AND DIRECTORS	13			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	☐ DELETE	1.1	TITLE		Change Ad	Idition
NAME	BAUMER, LEO		1.2	NAME			
STREET ADDRESS	9763 SW 68 ST.		1.3 \$		ADDRESS		Į,
CITY-ST-ZIP				1.4 CITY-ST-ZIP			
TITLE	D NUMBER MERCEDES	DELETE				Change Ad	dition
NAME CARCEL ADDRESS	BAUMER, MERCEDES 9763 SW 68 ST.		2.2 NAME 2.3 STREET ADO				
STREET ADORESS	MIAMI FL				· I		
CITY-ST-ZIP TITLE	MINAMI FC	☐ OELETE		CITY-S	11 - ZIP	☐ Change ☐ Ad	Idition
NAME				NAME	1	tand Startige Last File	
STREET ADDRESS					ADDRESS		ļ
CITY-ST-ZIP				CITY-S	l l		
TITLE	· · · · · · · · · · · · · · · · · · ·	☐ DELETE		TITLE		☐ Change ☐ Ad	idition
NAME			4. 2	NAME	1		
STREET ADDRESS			4.3	STREET	ADDRESS		ľ
CITY-ST-ZIP			4.41	CITY-S	r- ZIP		
TITLE		☐ DELETE		TITLE		Change Ad	dition
NAME			5.2 (NAME			
STREET ADDRESS			5.3	STREET	ADDRESS		
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·		CITY-SI	r-zip		
TITLE		☐ DELETE		TITLE		Change Ad	dition
NAME				NAME			
STREET ADORESS					ADDRESS		
CITY-ST-ZIP			644	CITY-S1	1-21P		

14. Thereby 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:

/14/98 × 305)279.0136