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

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 460698

(4)

LEON IRON AND METAL, INC.

Principal Place of Business Mailing Address						i samini Athum Reser annen diser unter imit ann	st Britin Antion Ani	ier millior	DFBII IOOI
3720 WOODVILLE HWY P O BOX 5874 TALLAHASSEE FL 32314		3720 WOODVILLE HWY P O BOX 5874 TALLAHASSEE FL 32314-5874			4				
(TICLE WEIGHTE	12 22				3. Date Incorporated or Qualified 3a. Date of Last Report 09/06/1974 02/20/1996				
2. Principal Pi	ace of Business	2a. Mailing Address			٠.	4. FEI Number			plied For
21		26	·			59-1623393		No	t Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc.				5. Certificate of Status Desired			dditional quired
City & State)	City & State				6. Election Campaign Financing			May Be
23		28				Trust Fund Contribution			o Fees
Zip	Country	Zip	Cou	ıntry	***	8. This corporation has liability for intel	ngible tax ur	ider s	199.032,
24	25	29	30		:	Florida Statutes X Ye	es 🔲 No		
	9, Name and Address of Curren	nt Registered Agent				10, Name and Address of New Regist	tered Agent		
FRIF	DMAN, LEON B			81	Name				
3720 SO WOODVILLE HWY				82	Street	Address (P.O. Box Number is Not Acceptable)		<u> </u>	
TAL	LAHASSEE FL 32301			83					
				84	City		FL 85	Zip (Code
dd Dawnaan	the area since of Captions 607 050	00 and CO2 1EO0. Flatida Ctat.	ton the n		namad	corporation submits this statement for the purp	- 1	nica la	ropintored
office or re	egistered agent, or both, in the State	of Florida. Such change was	authorize	d by	the corr	poration's board of directors. I hereby accept the	ne appointme	antas ∍ntas	registered
agent. I ar	ท familiar with, and accept the obliga	ations of, Section 607.0505, F	lorida Sta	tutes	-				
SIGNATURE									
12.	Signature types or proved name of registered ago CAELICE DO AN	ont and little if applicable. (NO D DIRECTORS	15: Registere	d Age	nt signature	e required when reinstaling) ADDITIONS/CHANGES TO OFFICER	DATE S AND DIRE	CTOR	C IN 12
lilite	PD	DELETE	117	TI F		ADDITIONS OF AMERICAN			Addition
NAME	FRIEDMAN, LEON		1.2 N				-		
STREET ADDRESS	3720 WOODVILLE HWY S.				address				
Y	TALLAHASSEE FL		1						
CHY-SI-7iP TITLE		DELETE	217	ITY-S	1-217		CI	าลกลล	Addition
NAME	D CONTOURNAME MADO D	had been	2.2 N				L 0.		
	FRIEDMAN, MARC, D 3720 WOODVILLE HWY				*DDDCCC				
STREET ADDRESS					ADDRESS	*			
CITY-ST-ZIP TITLE	TALLAHASSEE FL ST	DELETE	3.17	CITY - S	1 - 2117	<u> </u>	Lici	nange	Addition
NAME	FRIEDMAN, LOIS K.	the Detect	3.2 N					-unigo	
STREET ADORESS	3720 WOODVILLE HWY				ADDRESS				
	TALLAHASSEE FL								
CITY-ST-ZIF TITLE	TALLAMASSEE PL	DELETE	4.1 T	DITY-S	1-21		[_] CI	nanoe	Addition
NAME		tund Detroit		NAME					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
STREET ADDRESS			- 6		ADDRESS				
COLY-ST-ZIP TITLE		DELETE	9.4 U	HTY-S ITLE	1 · ZIF		☐ Ci	nance	Addition
NAME			5.2 N						
STREET ADDRESS					ADDRESS				
CITY - ST - ZIP				ITY-S					
ILITE THE		☐ DELETE		ITLE "		1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	□ ci	nange	Addition
NAME				AME		and the second of the second		•	
STREET ADDRESS					ADDRESS				,

6.4 CITY-ST-ZIP

14. Too hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Fiorida 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

SIGNATURE:

CITY - ST - ZIP

FILED

Feb 13 1997 8:00am

Secretary of State