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PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 460698

(4)

LEON IRON AND METAL, INC.

FILED
Jan 21 1998 8:00am
Secretary of State

Principal Place of Business
3720 WOODWILLE HAY 70 BOX 3874 P.O BOX 3874
P O BOX 5974 TALLAHASSEE FL 32314 TALLAHASSEE FL 32314 2. Principal Place of Business 2. A Making Address 2. Principal Place of Business 3. Date Incorporated or Qualified Og/16/1974 2. Principal Place of Business 3. Date Incorporated or Qualified Og/16/1974 2. Principal Place of Business 3. Date Incorporated or Qualified Og/16/1974 2. Principal Place of Business 3. Date Incorporated or Qualified Og/16/1974 2. Principal Place of Business 3. Date Incorporated or Qualified Og/16/1974 3. Date Incorporated or Qualified Og/16/1974 3. Date Incorporated or Qualified Og/16/1974 3. Date Incorporated or Status Desired Status Desir
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27. Principal Place of Business 28. Mailing Address 4. FEI Number Applied For Style Nort Applicable Suite, Apt. 4, etc. Suite,
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Suite, Apt. #, etc. 25 59-1623393 Not Applicable Suite, Apt. #, etc. 27 Suite, Apt. #, etc. 28 Suite, Apt. #, etc. 29 Personal from your sor has paid the current year Intangible Personal FROMAN, LEON B. 3720 SO WOODVILLE HWY TALLAHASSEE Ft. 32301 38 Street Address (P.O. Box Number is Not Acceptable) 38 Street Address (P.O. Box Number is Not Acceptable) 38 Street Address (P.O. Box Number is Not Acceptable) 40 Suite, Apt. #, etc. 40 Suite
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Zip
Zip Country Zip Country S. This comporation owes or has paid the current year Intangible Personal Property Tax due June 30 Yes No
S. Name and Address of Current Registered Agent FRIEDMAN, LEON B 3720 SO WOODVILLE HWY TALLAHASSEE FL 32301 82 Street Address (P.O. Box Number is Not Acceptable) 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, 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, 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, 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, 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, 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, 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, or both in the state agent agent and such accept the appointment as registered agent, or both in the state agent age
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3720 SO WOODVILLE HWY TALLAHASSEE FL 32301 82 Street Address (P.O. Box Number is Not Acceptable) 83 B4 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 office or registered agent accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed named or registered agent and life if applicable. (NOTE Registered Agent signature required when reinstaffing) OATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE PD DELETE 1.1 TITLE Change Addition FRIEDMAN, LEON STREET ADDRESS 13. STREET ADDRESS CITY-ST-2IP TALLAHASSEE FL 1.4 CITY-ST-2IP TITLE D Change Addition FRIEDMAN, MARC, D STREET ADDRESS CITY-ST-2IP TALLAHASSEE FL 2.4 CITY-ST-2IP TITLE ST DELETE 3.1 TITLE Change Addition FRIEDMAN, LOIS K. 3.2 NAME STREET ADDRESS TALLAHASSEE FL 3.3 CITY-ST-2IP TITLE DELETE 3.1 TITLE Change Addition FRIEDMAN, LOIS K. 3.2 NAME STREET ADDRESS TALLAHASSEE FL 3.3 CITY-ST-2IP TITLE DELETE 3.3 TITLE Change Addition NAME STREET ADDRESS TALLAHASSEE FL 3.3 CITY-ST-2IP TITLE DELETE 3.3 TITLE Change Addition NAME STREET ADDRESS 4.4 CITY-ST-2IP TITLE DELETE 3.3 TITLE Change Addition NAME STREET ADDRESS 4.4 CITY-ST-2IP TITLE DELETE 3.5 TITLE Change Addition NAME STREET ADDRESS 4.4 CITY-ST-2IP TITLE DELETE 3.5 TITLE Change Addition NAME STREET ADDRESS 4.4 CITY-ST-2IP TITLE DELETE STREET
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Signature PD
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 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, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, hypad or privide name of registered agent and tide if applicable.
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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 agent, or both, in the State of Plorida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent and this, and accept the obligations of, Sections 607 0505, Florida Statutes by the corporation's board of directors. I hereby accept the appointment as registered agent agent and the purpose of changing its registered agent agent agent agent and the purpose of changing its registered agent ag
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NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

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.

CICMATHDE.

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877-6106