

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Dorinda B. Manning
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 626603

(5)

1. Corporation Name

LEADWAY INVESTMENTS, INC.

Principal Place of Business

Mailing Address

~~XXXXXXXXXXXXXXXXXXXX~~
~~XXXXXXXXXXXXXXXXXXXX~~
~~XXXXXXXXXXXXXXXXXXXX~~

~~XXXXXXXXXXXXXXXXXXXX~~
~~XXXXXXXXXXXXXXXXXXXX~~
~~XXXXXXXXXXXXXXXXXXXX~~

2. Principal Place of Business

2a. Mailing Address

21 R. Abe Blankenstein

26 c/o Sanford N. Reinhard

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 1183 A. Finch Ave, W

27 2875 N.E 191st Street, #404

City & State

City & State

23 Downsview, Ontario

28 N. Miami Beach, Florida

Zip

Country

Zip

Country

24 M3J 2G2

25 Canada

29 33180

30 Florida

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LEE MILICH, ESQUIRE
11900 BISCAYNE BLVD.
SUITE 809
NORTH MIAMI FL 33181

81 Name

Sanford N. Reinhard, P.A.

82 Street Address (P.O. Box Number is Not Acceptable)

2875 N.E 191st Street

83 Suite 404

84 City

N. Miami Beach

FL

85 Zip Code

33180

11. Pursuant to the provisions of Sections 607.05(2) and 607.15(8), 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, thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.15(8), Florida Statutes.

SIGNATURE

(Signature of Current Registered Agent or Officer or Director)

(Signature of New Registered Agent or Officer or Director)

12. OFFICERS AND DIRECTORS

13. ADDITIONS-CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	VD
NAME	LEVINE, S.J.
STREET ADDRESS	801 ARTHUR GODFREY RD
CITY, ST, ZIP	MIAMI BCH. FL
TITLE	PD
NAME	FIALKOV, GERALD S.
STREET ADDRESS	1183 A FINCH AVE W.#11
CITY, ST, ZIP	DOWNSVIEW, ONTARIO
TITLE	SD
NAME	BLANKENSTEIN, R.A.
STREET ADDRESS	1183 A FINCH AVE W.#11
CITY, ST, ZIP	DOWNSVIEW, ONTARIO
TITLE	D
NAME	FIALKOV, JOE
STREET ADDRESS	1183 A FINCH AVE W.#11
CITY, ST, ZIP	DOWNSVIEW, ONTARIO
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

14 TITLE		☐ Change ☐ Addition
15 NAME		
16 STREET ADDRESS		
17 CITY, ST, ZIP		
18 TITLE		☐ Change ☐ Addition
19 NAME		
20 STREET ADDRESS		
21 CITY, ST, ZIP		
22 TITLE		☐ Change ☐ Addition
23 NAME		
24 STREET ADDRESS		
25 CITY, ST, ZIP		
26 TITLE		☐ Change ☐ Addition
27 NAME		
28 STREET ADDRESS		
29 CITY, ST, ZIP		
30 TITLE		☐ Change ☐ Addition
31 NAME		
32 STREET ADDRESS		
33 CITY, ST, ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information included 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 or attached to or on an attachment with an officer.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

R A BLANKENSTEIN

APRIL 12, 1995

411-665-9911