

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 657086 (5)

1. Corporation Name

MAPLE LEAF ENTERPRISES, INC.



Principal Place of Business

213 EDWARD AVENUE
~~GREENFIELD PARK - QUE CAN~~
LEHIGH FL 33936

Mailing Address

213 EDWARD AVENUE
~~GREENFIELD PARK - QUE CAN~~
LEHIGH FL 33936

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

9. Name and Address of Current Registered Agent

ALLEN, R.A., CPA
9753 S. ORANGE BLOSSOM TR.
ORLANDO FL 32821

3. Date Incorporated or Qualified

02/25/1980

3a. Date of Last Report

04/19/1995

4. FEI Number

98-0056305

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

J. NATHAN STOUT C.P.A.

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

403 JOAN AVE #A

83

84 City

LEHIGH ACRES

FL

85 Zip Code

33971

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 607.1505, Florida Statutes.

SIGNATURE

Signature typed or printed name and registered agent or director

Signature typed or printed name and registered agent or director

3/15/96

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
P	STEELE, VIC	213 EDWARD AVENUE	LEHIGH FL	<input type="checkbox"/>
V	STEELE JOYCE	213 EDWARD AVE	LEHIGH FL	<input type="checkbox"/>
ST	STEELE, JOANNE	120 GRANT AVE.	LEHIGH FL	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE	Change	Addition
CEO	STEELE VIC	213 EDWARD AVE	LEHIGH FL	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
P	DRUMMOND HOGAN	309 JACKSON AVE	LEHIGH FL	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
V	KEVIN CERONE	120 GRANT AVE	LEHIGH FL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ST	JOYCE STEELE	213 EDWARD AVE	LEHIGH FL	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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)(k), 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 or person 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:

JOYCE STEELE
JOYCE STEELE

4-11-96

941 369 4860

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

CR2E034 (12/95)