

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED
Feb 26, 2007 08:00 A
Secretary of State

DOCUMENT # A00000000438 1. Entity Name LEDER ENTERPRISES, LTD.	
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Principal Place of Business % LEDER GROUP INVESTMENT PROPERTIES 6530 WEST ROGERS CIRCLE, SUITE #31 BOCA RATON, FL 33487	Mailing Address % LEDER GROUP INVESTMENT PROPERTIES 6530 WEST ROGERS CIRCLE, SUITE #31 BOCA RATON, FL 33487
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DO NOT WRITE IN THIS SPACE

01242007 No Chg-LP

CR2E003 (12/06)

4. FEI Number 65-0997563	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent DANIELS, NICHOLAS M ESQ. THERREL BAISDEN, P.A. / SUNTRUST INTL. CTR ONE S.E. THIRD AVENUE, SUITE 2400 MIAMI, FL 33131

DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable	DATE _____
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FILE NOW!!! FEE IS \$500.00 After May 1, 2007, Fee will be \$900.00
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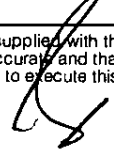
A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION	
DOCUMENT #	P00000023931
NAME	LEDER GROUP, INC.
STREET ADDRESS	6530 WEST ROGERS CIRCLE, SUITE #31
CITY - ST - ZIP	BOCA RATON, FL 33487
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
DOCUMENT #	
NAME	
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CITY - ST - ZIP	

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U000000649522
03/07/07-80052-018 500.00

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:  Sean M Leder	Date _____	Daytime Phone # 561-995-7878
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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date Daytime Phone #

STAPLE CHECK HERE