

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000002533

FILED
Mar 27, 2006
Secretary of State

Entity Name: LEADER INSTRUMENTS CORPORATION

Current Principal Place of Business:

6484 COMMERCE DRIVE
CYPRESS, CA 90630

New Principal Place of Business:

Current Mailing Address:

6484 COMMERCE DRIVE
CYPRESS, CA 90630

New Mailing Address:

FEI Number: 11-2200988

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GONOS, GEORGE
5479 TABB AVE.
SPRING HILL, FL FL34609 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: OHMATSU, SHIGERU
Address: TOKYO
City-St-Zip: JAPAN,

Title: D () Delete
Name: PIRECE, JOHN
Address: 1402 TERRA BELLA
City-St-Zip: IRVINE, CA 92603

Title: D () Delete
Name: GONOS, GEROGE
Address: 5479 TABB AVE.
City-St-Zip: SPRING HILL, FL 34609

Title: S () Delete
Name: MURASE, SATORU
Address: 399 PARK AVE.
City-St-Zip: NEW YORK, NY 10022

Title: T (X) Delete
Name: SAWA, MASAHIRO
Address: 84 DOVECREST
City-St-Zip: IRVINE, CA 92620

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: GONOS, GEORGE
Address: 5479 TABB AVENUE
City-St-Zip: SPRING HILL, FL 34609

Title: S (X) Change () Addition
Name: MURASE, SATORU
Address: 399 PARK AVENUE
City-St-Zip: BEW YORK, NY 10022

Title: T (X) Change () Addition
Name: SAWA, MASAHIRO
Address: 84 DOVECREST
City-St-Zip: IRVINE, CA 92620

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MASAHIRO SAWA

PRES

03/27/2006

Electronic Signature of Signing Officer or Director

_____ Date