FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F90690 1. Corporation Name

LEEWAY CORP.

FILED Apr 16, 1999 8:00 am Secretary of State

04-16-1999 90026 018 ***150.00



Principal Place	of Business	Mailing Address					911 4 1811 81811 8191	1 87811 811	#15 #1#E1 (##1	
108 SE 8TH AVENUE 108 SE 8TH AVENUE FT LAUDERDALE FL 33301-2044 FT LAUDERDALE FL 33301-20)44			DO NOT WRITE II	N THIS SPAC	Œ		_
						3. Date Incorporated or Qualifed			<u> </u>	
						07/08/1982				
2. Principal Pl	2a. Mailing Address	ailing Address			4. FEI Number			Applied For		
21		26	2-2	يح		<u>==59-2202667</u>			Applicable_	==
Suite, Apt.:		Suite, Apt. #, etc.				5. Certificate of Status Desired		ee Rec	<u>'</u>	
City & State		City & State				6. Election Campaign Financing Trust Fund Contribution	Δ, ζ	5.00 M dded to	•	
Zip	Country		Zip Country			8. This corporation owes the current year Intangible Personal Property Tax. Yes No				
24	25		1			Personal Property Tax. Yes □No 10. Name and Address of New Registered Agent				
	9. Name and Address of Current	Registered Agent	B	31 1	Name	10. Name and Address of New Kegi	stereu Agerri			1
LEE,	INΔ		Ľ				,			1
	S.E. 8TH AVENUE		82 Street Ad			ss (P.O. Box Number is Not Acceptable))			
	AUDERDALE FL 33301		8	33						1
										ļ
			8	34	City		FL 85	Zip Ci	ode	
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State on familiar with, and accept the obligat	of Florida. Such change was auth	iorized b	oy th	named corpor e corporation	ation submits this statement for the pur 's board of directors. I hereby accept th	pose of chang e appointmen	ing its r t as reg	egistered istered	
SIGNATURE										١
	Signature, typed or printed name of registered agen		_	gent si	ignature required v		DATE	ECTO	20 IN 12	ł
12.	PST OFFICERS AN	D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICE		hange	Addition	1
TITLE	_		1.1 TITLE							j
NAME .	LEE, INA 108 S.E. 8TH AVE.		1.2 NAME		000000] '
STREET ADORESS	FT. LAUDERDALE FL			.3 STREET ADDRESS						L
CITY-ST-ZIP	D D	DELETE		1.4 CITY-ST-ZIP 2.1 TITLE				hange	Addition	1 3
TITLE	LEE, INA		2.2 NAME					•	_	
NAME LEE, INA -STREET ADDRESS - 108: S.E=8TH-AVENUE			i	STREET ADDRESS						
CITY-ST-ZIP	FT. LAUDERDALE FL		2. 4 CITY							t
TITLE	V DELETE		31 TITLE					hange	Addition	1
NAME	DELANOY, GRACE		3.2 NAME							ļ
STREET ADDRESS	108 S.E. 8TH AVENUE			EET A	DORESS					ļ
CITY-ST-ZIP	FT. LAUDERDALE FL			3.4. CITY+ST-ZIP						}
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NAME:			5.2 NAM	ΙE	-	·				
STREET ADDRESS			5.3 STR	EETAI	DORESS					
CITY-ST-ZIP			5.4 CITY-ST		ZIP		·			1
TITLE		☐ DELETE	6.1 TITL					hange	☐ Addition	
NAME			6.2 NAM	E						1
STREET ADDRESS			6.3 STR	EETAI	DORESS					
			64 CITY	-ST-7	ZIP .					1

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 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, with all other like empowered.

SIGNATURE: