

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 10 AM 11:58

DOCUMENT # F93000002675 (7)

1. Corporation Name

LEADING EDGE MARKETING, INC.

Principal Place of Business

2458 OLD DORSETT ROAD
#102
MARYLAND HEIGHTS MO 63043

Mailing Address

2458 OLD DORSETT ROAD
#102
MARYLAND HEIGHTS MO 63043

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

06/09/1993

3a. Date of Last Report

05/19/1994

4. FEI Number

43-1611052

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

2. Principal Place of Business

21

Suite, Apt. #, etc.

22. City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27. City & State

28

Zip

Country

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC
1201 HAYES STREET
STE - 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when filing)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	P
NAME	TRAWECK, JAMES	1.2 NAME	Newbern, Rick
STREET ADDRESS	1715 DEER TRACKS TRAIL, #240	1.3 STREET ADDRESS	2458 Old Dorsett Rd. #102
CITY - ST - ZIP	ST. LOUIS MO 63131	1.4 CITY - ST - ZIP	Maryland Heights, MO 63043
TITLE	SCD	2.1 TITLE	SCD
NAME	GREENBERG, ALAN	2.2 NAME	Greenberg, Alan
STREET ADDRESS	1715 DEER TRACKS TRAIL, #240	2.3 STREET ADDRESS	2458 Old Dorsett Rd. #102
CITY - ST - ZIP	ST. LOUIS MO 63131	2.4 CITY - ST - ZIP	Maryland Heights, MO 63043
TITLE	CVC	3.1 TITLE	
NAME	BRODSKY, HOWARD	3.2 NAME	
STREET ADDRESS	370 HARVEY ROAD	3.3 STREET ADDRESS	
CITY - ST - ZIP	MANCHESTER NH 03103	3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 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)(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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13, unchanged, or only in attachment with an address.

SIGNATURE:

Rick Newbern Rick Newbern 2-2-95 314-291-0000

SIGNATURE AND TYPED OR PRINTED NAME OF WORKING OFFICER OR DIRECTOR

(Date)

(Telephone Number)