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 # H12217 (6)

1. Corporation Name
DELEON INTERNATIONAL CORP.

Principal Place of Business	Mailing Address
C/O 1401 EAST BROWARD BLVD., SUITE 201 FT LAUDERDALE FL 33301	C/O 1401 EAST BROWARD BLVD., SUITE 201 FT LAUDERDALE FL 33301

3. Date Incorporated or Qualified: 07/13/1984
3a. Date of Last Report: 01/31/1995

2. Principal Place of Business	2a. Mailing Address
21 1031 West Morse Blvd.	26 P.O. Box 2762
Suite, Apt. #, etc. 22 200	Suite, Apt. #, etc. 27
City & State 23 Winter Park FL	City & State 28 Winter Park FL
Zip 24 32789 Country 25 USA	Zip 29 32790-2762 Country 30 USA

4. FEI Number: 59-2458540 ☐ 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

9. Name and Address of Current Registered Agent

WEATHERFORD, WILLIAM P JR
1031 WEST MORSE BLVD., SUITE 200
WINTER PARK FL 32789

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 title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	DPS	☒ DELETE
NAME	STEPHANY, EDWARD G.	
STREET ADDRESS	1401 E BROWARD BLVD #201	
CITY-ST-ZIP	FT. LAUDERDALE FL	
TITLE	VP	☐ DELETE
NAME	SIEDEL, GARY J	
STREET ADDRESS	1404 E BROWARD BLVD #201	
CITY-ST-ZIP	FT LAUDERDALE FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D/P/S	☐ Change ☒ Addition
1.2 NAME	Phillip P. Quincannon	
1.3 STREET ADDRESS	1031 West Morse Blvd. #200	
1.4 CITY-ST-ZIP	Winter Park, FL 32789	
2.1 TITLE	D/V	☒ Change ☐ Addition
2.2 NAME	Gary J. Siedel	
2.3 STREET ADDRESS	1031 West Morse Blvd. #200	
2.4 CITY-ST-ZIP	Winter Park, FL 32789	
3.1 TITLE	D/T	☐ Change ☒ Addition
3.2 NAME	Frances E. Clydesdale	
3.3 STREET ADDRESS	1031 West Morse Blvd. #200	
3.4 CITY-ST-ZIP	Winter Park, FL 32789	
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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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 if changed, or on an attachment with an address.

SIGNATURE: [signature] Gary J. Siedel 4/8/96 (407) 629-5008
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #