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Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # J45070 1. Corporation Name

LEECO CORP.

Principal Place of Business

rilli
Jan 22, 1999 8:00am
Secretary of State

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me and Address of Current F	Registered Agent	91	Nama	10. Name and Address of New Re	igistered Agent		
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agent, or both, in the State of	Florida. Such change was aut	horized by	the corporation	on's board of directors. I hereby accept	the appointment	ing its r as reg	egistered istered
with, and accept the obligation	ns of, Section 607.0505. Florid	da Statutes	•			_	
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	, DONALD S. RD AVE 131 visions of Sections 607.0502 agent, or both, in the State of with, and accept the obligation and or printed name of registered agent are	3050 MIAMI FL 33131-1768 US Isiness 2a. Mailing Address 25 Suite, Apt. #, etc. 27 City & State 28 Country Zip 29 39 3050 MIAMI FL 33131-1768 US City & State 28 Country Zip 29 30 Miami Address of Current Registered Agent ADONALD S. RD AVE 131 Visions of Sections 607.0502 and 607.1508, Florida Statutes agent, or both, in the State of Florida. Such change was aut with, and accept the obligations of, Section 607.0505, Florida Statutes agent, or both, in the State of Florida. Such change was aut with, and accept the obligations of, Section 607.0505, Florida Statutes agent, or both, in the State of Florida. Such change was aut with, and accept the obligations of, Section 607.0505, Florida Statutes agent, or both, in the State of Florida. Such change was aut with, and accept the obligations of, Section 607.0505, Florida Statutes agent, or both, in the State of Florida. Such change was aut with, and accept the obligations of, Section 607.0505, Florida Statutes agent, or both, in the State of Florida. Such change was aut with, and accept the obligations of, Section 607.0505, Florida Statutes agent, or both, in the State of Florida. Such change was aut with, and accept the obligations of, Section 607.0505, Florida Statutes agent, or both, in the State of Florida. Such change was aut with, and accept the obligations of, Section 607.0505, Florida Statutes agent, or both, in the State of Florida. Such change was aut with, and accept the obligations of, Section 607.0505, Florida Statutes agent, or both, in the State of Florida. Such change was aut with, and accept the obligations of, Section 607.0505, Florida Statutes agent, or both, in the State of Florida Statutes agent, or both, in the State of Florida Statutes agent, or both, in the State of Florida Statutes agent, or both, in the State of Florida Statutes agent, or both, in the State of Florida Statutes agent, or both, in the State of Florida Statutes agent, or both, in the State of Florida Statutes agent, or both, in the State of Florida Statutes agent, or both,	Siness	3050 MIAMI FL 33131-1768 US Suite, Apt. #, etc. 27 City & State 28 Country Zip Country 25 29 30 The and Address of Current Registered Agent April 10 AVE A City A City	MAMAIR L 33131-1788 US April 1986 2a. Mailing Address 2b. Suite, Apt. #, etc. 27 City & State 27 City & State 28 Country 28 29 Country 29 29 30 Country 29 30 Country 28 Trust Fund Contribution Personal Property Tax. 10. Name and Address of New Re 82 Street Address (P.O. Box Number is Not Acceptable Address of New Re 83 Kite City Wistons of Sections 607 0502 and 607 1508, Florida Statutes, the above-mamed corporation submits this statement for the pagent, or both, in the State of Electrica Such change was authorized by the corporation's board of directors. I hereby accept the obligations of, Section 607 3505, Florida Statutes With, and accept the obligations of, Section 607 3505, Florida Statutes OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFI L, GEORGE D. CREFELLER PLZA#5432 ORK NY DELETE 1 TITLE 1 NAME 22 STREET ADDRESS ACTIV-ST-ZP DELETE 33 TITLE 22 NAME 33 STREET ADDRESS 44 CITY-ST-ZP DELETE 51 TITLE 22 NAME 43 STREET ADDRESS 44 CITY-ST-ZP DELETE 51 TITLE 22 NAME 43 STREET ADDRESS 44 CITY-ST-ZP DELETE 51 TITLE 22 NAME 43 STREET ADDRESS 44 CITY-ST-ZP DELETE 51 TITLE 22 NAME 43 STREET ADDRESS 44 CITY-ST-ZP DELETE 51 TITLE 22 NAME 43 STREET ADDRESS 44 CITY-ST-ZP DELETE 51 TITLE 22 NAME 43 STREET ADDRESS 44 CITY-ST-ZP DELETE 51 TITLE 22 NAME 43 STREET ADDRESS 44 CITY-ST-ZP DELETE 51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZP DELETE 51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZP DELETE 51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZP DELETE 65 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZP DELETE 65 TITLE 52 NAME 63 STREET ADDRESS 54 CITY-ST-ZP DELETE 65 TITLE 52 NAME 63 STREET ADDRESS 54 CITY-ST-ZP DELETE 65 TITLE 65 TITLE 65 TITLE 65 STREET ADDRESS 65 STREET ADDRESS 66 STREET ADDRESS 67 STREET ADDRESS 67 STREET ADDRESS 67 STREET ADDRESS 68 STREET ADDRESS 69 STREET ADDRESS 69 STREET ADDRESS 69 STREE	South Factor Section Section	MMAN FL 33131-1788 DO NOT WRITE IN THIS SPACE

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 changes, or on an attachagent with an address, with all other like empowered.

SIGNATURE: