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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K65633

(5)

LEO MARKET INC.

Principal Place of Business Mailing Address 9701 NW 27TH AVE 9701 NW 27TH AVE MIAMI FL 33147 MIAMI FL 33147-2153 3. Date Incorporated or Qualified 3a. Date of Last Report 02/14/1989 05/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0125941 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation has liability for intangible tax under s. 199.032, Yes S No 24 25 29 Florida Statutes 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent RODRIGUEZ, RAUL 81 Name 9701 N.W. 27TH AVENUE Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33147** 83 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutos, 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. 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 Againt signature required when reinslating) (96/6)OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change TITLE 1.1 TITLE RODRIGUEZ, RAUL NAME 1.2 NAME CR2E034 1211 NE 130TH ST. 1.3 STREET ADDRESS STREET ADDRESS NO. MIAMI FL 1.4 CHY- ST- ZIP CITY-ST-ZIP DELETE TITLE 21 THLE ☐ Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 City-ST-7IP DELETE Change Addition 3.1 TOTALE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY - \$1 - ZIP DELFTE Change Addition TITLE 4.1 TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELE1E TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5 3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY- ST-7/P DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST- ZIP 14. I do 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 eath, that I am an officer or director of the corporation or the receiver or trustee empowayed 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 altachment w

Raw Properties

**FILED** 

May 07 1997 8:00am

Secretary of State