## 2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# L89096

FILED Oct 21, 2004 Secretary of State

Entity Nam	ie: LEGS MER	RCANTILE, INC.			
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
23269 US 4 BOCA RAT	41 ON, FL 33428	US			
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
23269 S ST 1701 S STA BOCA RAT		5464 US			
FEI Number: (	65-0208601	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
LEONARD ' 23269 S. ST BOCA RAT		US			
The above r		bmits this statement for the p	urpose of changing its registered	office or registered agent, or both,	
SIGNATUR	E:				
	Electronic	Signature of Registered Age	nt	Date	
		2)(b), F.S., the corporation did no Trust Fund Contribution ( ).	t receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () E WALD, LEONARI 23269 US 441 BOCA RATON, FI	,	Title: ( Name: Address: City-St-Zip:	) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LEONARD WALD **PRES** 10/21/2004