

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003141

FILED  
Jan 24, 2009  
Secretary of State

Entity Name: LEADING LADIES, INC.

**Current Principal Place of Business:**

4000 TOWERSIDE TERRACE  
1204  
MIAMI SHORES, FL 33028

**New Principal Place of Business:**

2808 N 46 AVENUE  
E 451  
HOLLYWOOD, FL 33021

**Current Mailing Address:**

4000 TOWERSIDE TERRACE  
1204  
MIAMI SHORES, FL 33028

**New Mailing Address:**

2808 N 46 AVENUE  
E 451  
HOLLYWOOD, FL 33021

FEI Number: 65-0594886

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GLAUSER, STUART H  
14446 WEST DIXIE HWY.  
MIAMI, FL 33161 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: PASTON, RACHELL  
Address: 4140 N. 34TH AVE.  
City-St-Zip: HOLLYWOOD, FL 33021

Title: VP ( ) Delete  
Name: FRIEDMAN, RODI ALEXANDER  
Address: 13914 NW 16TH DR.  
City-St-Zip: PEMBROKE PINES, FL 33028

Title: D ( ) Delete  
Name: CASINO, CANDI  
Address: 19511 N.E. 19TH CT.  
City-St-Zip: N MIAMI BEACH, FL 33179

Title: T ( ) Delete  
Name: WINEPOL, LILLYAN  
Address: 2808 N 46TH AVENUE, E451  
City-St-Zip: HOLLYWOOD, FL 33021

Title: P ( ) Delete  
Name: SUTTON, NANCY  
Address: 20308 NE 34TH COURT  
City-St-Zip: AVENTURA, FL 33180

Title: T ( ) Delete  
Name: WEINTHAL, RIVA  
Address: 4000 TOWER SIDE TERRACE  
City-St-Zip: MIAMI, FL 33138

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LILLYAN WINEPOL

Y

01/24/2009

Electronic Signature of Signing Officer or Director

Date