


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 27, 2008 8:00 am**  
**Secretary of State**

02-27-2008 90006 017 \*\*\*150.00

<b>DOCUMENT # P00000023931</b> 1. Entity Name <b>LEDER GROUP, INC.</b>					
Principal Place of Business <b>C/O LEDER GROUP INVESTMENT PROPERTIES          6530 WEST ROGERS CIRCLE - SUITE #31          BOCA RATON, FL 33487</b>			Mailing Address <b>C/O LEDER GROUP INVESTMENT PROPERTIES          6530 WEST ROGERS CIRCLE - SUITE #31          BOCA RATON, FL 33487</b>		
2. Principal Place of Business - No P.O. Box # <b>4755 Technology Way Ste. 202 -          Boca Raton, FL 33431-3338</b>		3. Mailing Address <b>4755 Technology Way Ste. 202 -          Boca Raton, FL 33431-3338</b>			
Zip 		Country 		4. FEI Number <b>66-0997560</b>	
5. Certificate of Status Desired <input type="checkbox"/>		Applied For Not Applicable			
6. Name and Address of Current Registered Agent  <b>DANIELS, NICHOLAS M ESQ.          SUNTRUST INTERNATIONAL CENTER          ONE S.E. 3RD AVENUE - #2400          MIAMI, FL 33131</b>		7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>			
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>FILE NOW!!! FEE IS \$150.00          After May 1, 2008 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be          Added to Fees</b>			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D LEDER, SAM C/O 6530 WEST ROGERS CIRCLE #31 BOCA RATON, FL 33487	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	4755 Technology Way Ste. 202 Boca Raton, FL 33431-3338
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D LEDER, SEAN C/O 6530 WEST ROGERS CIRCLE #31 BOCA RATON, FL 33487	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	4755 Technology Way Ste. 202 Boca Raton, FL 33431-3338
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
<b>SIGNATURE: X</b> <i>Sean Leder</i> <b>2/14/08</b> <b>561-995-7878</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					