

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000053472

**FILED**  
**Feb 18, 2011**  
**Secretary of State**

**Entity Name:** LEADER TOBACCO CO., INC.

**Current Principal Place of Business:**

4100 NORTH POWERLINE ROADJ5  
J5  
POMPANO BEACH, FL 33073

**New Principal Place of Business:**

4100 NORTH POWERLINE ROAD  
J5  
POMPANO BEACH, FL 33073

**Current Mailing Address:**

4100 NORTH POWERLINE ROADJ5  
J5  
POMPANO BEACH, FL 33073

**New Mailing Address:**

4100 NORTH POWERLINE ROAD  
J5  
POMPANO BEACH, FL 33073

**FEI Number:** 65-1011301

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MAMAN, MYRA  
4100 NORTH POWERLINE ROAD  
J5  
POMPANO BEACH, FL 33073 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: PSTD  
Name: MAMAN, MYRA  
Address: 4100 NORTH POWERLINE ROAD, SUITE J5  
City-St-Zip: POMPANO BEACH, FL 33073

I hereby 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 all other like empowered.

SIGNATURE: MYRA MAMAN

PSDT

02/18/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date