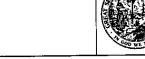
2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

P00000101551

1. Entity Name LEEDAR, INC.



FILED Jan 08, 2003 8:00 am Secretary of State

01-08-2003 90062 048 ***158.75

Principal Place of Business

2205 GATWICK COURT KISSIMMEE FL 34743

Mailing Address

Mailing Address

2205 GATWICK COURT KISSIMMEE FL 34743

2. Principal Plac		3. Mailing Address 2205 GATWICK COURT				I IACHTAL IN COME OF THE OWNER O			•	
	PATIDICK COURT	Suite, Apt. #, etc.			1	CHECK HERE IF MAKING CHANGES				
Suite, Apt. #,	etc.	Suite, Apr. #, etc.			 		VIARING	JHANGES	,	
City & State		City & State			4. F	El Number FO-2756276		<u> </u>	Applied For	
KISSIM	mee FL	Kissimmes	F	<u></u>	<u> </u>	59-3756376			Not Applicable	
Zip 3474	Country	34743	Country	, ,		ertificate of Status Desired	™ F	88.75 Ac ee Requir		
	6. Name and Address of Current				7. N	ame and Address of New Reg	stered A	jent		
	NIGEL QUÉM		1	Name					ŀ	
QUEMARO,	-	Street Address	(P.O. Bo	ox Number is Not Acceptable)						
•	/ICK COURT		L`	Jacob 7 1001000	(
									1	
KISSIMMEE, FL 34743								Zip Co	de	
				City			FL			
8 The above n	amed entity submits this statement for	or the purpose of changing its	registered o	office or registe	red age	ent, or both, in the State of Florid	a. Lam fa	amiliar with	n, and accept	
the obligation	ns of registered agent.					-				
	1. A.									
SIGNATURE	ignature, typed or printed name of registered agent	and title if applicable. (NOT	E: Registered Ag	gent signature require	d when rei	instating)	DATE			
						·				
∐وار محد بيست. المحاجة	E NOW!!! FEE IS \$150.00					9. Election Campaign Finar	cing		.00 May Be ed to Fees	
After i	Payable to Florida Department of	f State				Trust Fund Contribution.	ب	Addi	50 10 1 663	
			11.		 AD	L DITIONS/CHANGES TO OFFIC	ERS AND	DIRECTO	RS IN 11	
	OFFICERS AND		TITLE			211101107		☐ Change		
	PS OUTHARD MICE!	☐ Delete	NAME							
	QUEMARD, NIGEL 2205 GATWICK COURT		STREET /	ADDRESS						
	KISSIMMEE FL 34743		CITY-ST							
	<u> </u>	☐ Delete	TITLE				·	☐ Change	e 🔲 Addition	
	VPT	□ Delete	NAME	Ì						
	QUEMARD, TINA 2205 GATWICK COURT		STREET	ADDRESS						
	KISSIMMEE FL 34743		CITY-ST	r- ZIP						
	MOONIMEE TE OTT TO	☐ Delete	TITLE					☐ Change	e 🔲 Addition	
TITLE NAME	,		NAME							
STREET ADDRESS			STREET	ADDRESS					ļ	
CITY-ST-ZIP			CITY-S1	r-ziP						
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STREET ADDRESS			STREET	ADDRESS						
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NAME			NAME						ļ	
STREET ADDRESS				ADDRESS						
CITY-ST-ZIP			CITY-S	T-ZIP					<u></u>	
TITLE		☐ Delete	TITLE	T				Change	e Addition	
NAME			NAME							
STREET ADDRESS				ADDRESS						
CITY-ST-ZIP		•	CITY-S							
12. I hereby co	ertify that the information supplied wi	th this filing does not qualify for	or the exem	ption stated in	Section	119.07(3)(i), Florida Statutes.	urther cer	tify that th	e 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.