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Secretary of State
05-08-2003 90157 048 ***150.00

55046819

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000050709

1. Entity Name
THE LEADER METAL WORKS CORP.

Principal Place of Business
8681 NW 66TH STREET
MIAMI FL 33166

Mailing Address
8681 NW 66TH STREET
MIAMI FL 33166

2. Principal Place of Business | 3. Mailing Address
Suite, Apt. #, etc. | Suite, Apt. #, etc.
City & State | City & State
Zip | Country | Zip | Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 270010636 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
LLANES, JESUS L
32 SW 35 AVENUE
MIAMI FL 33135

7. Name and Address of New Registered Agent
Name JESUS, LL
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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 ______ 5/01/2003
Signature, typed or printed name of registered agent and title if applicable DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	PD	☐ Delete	TITLE	☐ Change ☐ Addition
NAME	LLANES, JESUS L		NAME	
STREET ADDRESS	32 SW 35 AVENUE		STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33135		CITY-ST-ZIP	
TITLE	VD	☐ Delete	TITLE	☐ Change ☐ Addition
NAME	RUBIO, LEONARDO L		NAME	
STREET ADDRESS	32 SW 35 AVENUE		STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33135		CITY-ST-ZIP	
TITLE	TD	☐ Delete	TITLE	☐ Change ☐ Addition
NAME	SOLOMON, NEWTON J		NAME	
STREET ADDRESS	12474 SW 17TH LANE		STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33175		CITY-ST-ZIP	
TITLE	D	☒ Delete	TITLE	☐ Change ☐ Addition
NAME	RUBIO, GINA M		NAME	
STREET ADDRESS	53 SW 97TH PL		STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33174		CITY-ST-ZIP	
TITLE	SD	☐ Delete	TITLE	☐ Change ☐ Addition
NAME	GUTIERREZ, TAIMY		NAME	
STREET ADDRESS	32 SW 35TH AVENUE		STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33135		CITY-ST-ZIP	
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition
NAME			NAME	
STREET ADDRESS			STREET ADDRESS	
CITY-ST-ZIP			CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify 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 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.

SIGNATURE: ______ 5/01/2003 7868415288