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FILED
May 11 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P94000029979 (9)**

1. Corporation Name
LEDDS INTERNATIONAL, INC.



Principal Place of Business
**6850 NINETEEN MILE ROAD
STERLING HEIGHTS MI 48314**

Mailing Address
**6850 NINETEEN MILE ROAD
STERLING HEIGHTS MI 48314**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/13/1994

4. FEI Number

65-0486546

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 **2601 NW 48th Street**

Suite, Apt. #, etc.

27 City & State

23 **Pompano Beach, FL**

24 **33073**

25 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

**MANONI, DAVID
2801 NORTHWEST 48TH STREET
POMPANO BEACH FL 33073**

10. Name and Address of New Registered Agent

81 Name **Daniel C. Mancini**

82 Street Address (P.O. Box Number is Not Acceptable)

2601 NW 48th Street

83

84 City **Pompano Beach**

FL

85 Zip Code **33073**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Daniel C. Mancini

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **VPD** ☐ DELETE
NAME **MANCINI, DANIEL C**
STREET ADDRESS **2801 NORTHWEST 48TH STREET**
CITY-ST-ZIP **POMPANO BEACH FL 33073**

TITLE **ASD** ☐ DELETE
NAME **MANCINI, DAVID A**
STREET ADDRESS **2801 NORTHWEST 48TH STREET**
CITY-ST-ZIP **POMPANO BEACH FL 33073**

TITLE **PD** ☐ DELETE
NAME **JANKOWSKI, PAUL C JR.**
STREET ADDRESS **6850 NINETEEN MILE ROAD**
CITY-ST-ZIP **STERLING HEIGHTS MI 48314**

TITLE **STD** ☐ DELETE
NAME **JANKOWSKI, LISA M**
STREET ADDRESS **6850 NINETEEN MILE ROAD**
CITY-ST-ZIP **STERLING HEIGHTS MI 48314**

TITLE **D** ☐ DELETE
NAME **MANCINI, STEVEN M**
STREET ADDRESS **6850 NINETEEN MILE ROAD**
CITY-ST-ZIP **STERLING HEIGHTS MI 48314**

TITLE **D** ☐ DELETE
NAME **MANCINI, EDWARD A**
STREET ADDRESS **6850 NINETEEN MILE ROAD**
CITY-ST-ZIP **STERLING HEIGHTS MI 48314**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an addition line with an address.

SIGNATURE

Daniel C. Mancini

4-7-98 (910) 739-6310

CR2E034 (10/97)