FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000033254

LEANDRO ENTERPRISES, INC.

Principal Place of Business

Mailing Address

FILED Mar 30 1998 8:00am Secretary of State

2120 GRAY MARE WAY				
0 221111				DO NOT WRITE IN THIS SPACE
well	rellington, FL 33414			3. Date Incorporated or Qualified
				4-29-94
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number Applied For
21 2 120	GRAY MALE WAY	26 2120 GRA	1 MARE U	Way 650505801 Not Applicable
Suite, Apl		Suite, Apt. #, etc.		- \$8.75 Additional
22		27		5. Certificate of Status Desired Fee Required
City & Stat	10	City & State	~ (6. Election Campaign Financing \$5.00 May Be
23 Well	INSTUM, FL	28 Wellingtu,	~, FC	Trust Fund Contribution
Zip	Country 14 25 USA			8. This corporation owes or has paid the current year Intangible
24 554	19 25 USA		30 USA	Personal Property Tax due June 30. 🔀 Yes 🔲 No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent				
RICHARD W LEANDRU JR BI Name KATRIMA LEANDRU				
2120 GEA-1 MARE WA-1 82 Street Address				Address (P.O. Box Number is Not Acceptable)
1				20 GRAY MARE WAY
Wellington, FL 33414				•
	,		84 City	- 85 Zip Code
				Wellips (02 FL 334)4
11. Pursuant	to the provisions of Sections 607 0502	and 607.1508, Florida Statutes	s, the above-named	corporation submits this statement for the purpose of changing its registered
agent la	im f a miliar wi <u>th, a</u> nd accept the r b) gati	or, Section 607 0505, Flori	ida Statutes.	poration's board of directors. I hereby accept the appointment as registered 3-12-95 e required when reinslating) DATE
SIGNATURE	Hahma SCC	hicker 14	1-11,	U3-12-98 DATE
			Registred Agent signature	
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	President	' B≮DFLETE	11 THE	PaesiderT
NAME	Richard L LEANdry J		1.2 NAME	KATRINA LEANDRO
STREET ADDRESS	2120 GRAL MARE WA		1.3 STREET ADDRESS	2120 GRAJ MARE WAY
CITY - ST - ZIF	Wellinston, FC 3341		1.4 CITY - ST - ZIP	WENINSTON, FL 33414
TITLE		☐ DELETE	2 1 TITLE	☐ Change ☐ Addition
NAME			2 2 NAME	
STREET ADDRESS			2 3 STREET ADDRESS	
CITY-ST-ZIP			2 4 CITY - ST - ZIP	
TITLE		☐ DELETE	3171116	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3 3 STREFT ADDRESS	[
CITY-ST-ZIP			3.4 CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4. 2 NAME	
STREET ADDRESS			4 3 STREET ADDRESS	
CITY-ST-7IP			4.4 CITY - ST - ZIP	
TITLE		☐ DELETE	5 1 TITLE	☐ Change ☐ Addition
NAME			5 2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	12.3
CITY - ST - 7iP			5.4 CITY - ST - 7IP	3.30
TITLE		☐ DELETE	6.1 TITLE	7000024730277ge - Addition
NAME			6 2 NAMI	-03/31/9801021026
STREET ADDRESS			6.3 STREET ADDRESS	***150.00
CITY - ST - ZIP			6 4 CITY - ST - ZIP	4444140.00
	- , , • , , , , , , , , , , , , , , , , 		V . O O. Z.II	

Thereby 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 arrival report or supplemental arrival report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 I changed or on an attrictive of with an address.

GNATURE: Tallowa Relationship of the corporation of the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 I changed or on an attrictive of with an address.

GNATURE: Tallowa Relationship of the corporation of the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 I changed or on an attrictive of the corporation of the corporation of the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes. I further certify that the information indicates and that my name appears in Block 12 or Block 13 I changed or on an attrictive of the corporation of the corpo

SIGNATURE: