

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P94000044122 (7)

1. Corporation Name

LEAP TECHNOLOGY, INC.



Principal Place of Business

Mailing Address

500 S AUSTRALIAN AVE 10TH FL  
WEST PALM BEACH FL 33401

500 S AUSTRALIAN AVE 10TH FL  
WEST PALM BEACH FL 33401

3. Date Incorporated or Qualified  
06/06/1994

3a. Date of Last Report  
05/10/1995

2. Principal Place of Business

2a. Mailing Address

21 238 Royal Palm Way

26 P.O. Box 3243

Suite, Apt. #, etc

Suite, Apt. #, etc

22 City & State

27 City & State

23 Palm Beach, FL

28 Palm Beach, FL

Zip

Country

Zip

Country

24 33480

25

29 33480

30

4. FEI Number

65-0499390

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 has liability for intangible tax under s. 199.032,  
Florida Statutes

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KEITEL, FREDERICK J III  
500 S AUSTRALIAN AVE 10TH FL  
WEST PALM BEACH FL 33401

81 Name

Keitel, Frederick J. III

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

238 Royal Palm Way

83

84 City

Palm Beach

FL

85 Zip Code

33480

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

Signature of person or firm of registered agent (typed or printed name)

(NOTE: Registered Agent signature required when re-registering)

(DATE)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D  
NAME KEITEL, FREDRICK J III  
STREET ADDRESS 500 S AUSTRALIAN AVE 10TH FL  
CITY-ST-ZIP WEST PALM BEACH FL 33401

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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NAME  
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CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11 TITLE D  
12 NAME Keitel, Frederick J. III  
13 STREET ADDRESS 238 Royal Palm Way  
14 CITY-ST-ZIP Palm Beach FL 33480

21 TITLE  
22 NAME  
23 STREET ADDRESS  
24 CITY-ST-ZIP

31 TITLE  
32 NAME  
33 STREET ADDRESS  
34 CITY-ST-ZIP

41 TITLE  
42 NAME  
43 STREET ADDRESS  
44 CITY-ST-ZIP

51 TITLE  
52 NAME  
53 STREET ADDRESS  
54 CITY-ST-ZIP

61 TITLE  
62 NAME  
63 STREET ADDRESS  
64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 a member or director of the corporation, or a trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or 13, or both, with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/19/96

561-855-0888

CR2E034 (3/96)