

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000073586 (7)

1. Corporation Name

LEADOFF PROMOTIONS, INC.



Principal Place of Business

2318 NORTH EAST 8TH STREET
FORT LAUDERDALE FL 33304

Mailing Address

2318 NORTH EAST 8TH STREET
FORT LAUDERDALE FL 33304

3. Date Incorporated or Qualified

10/03/1994

3a. Date of Last Report

04/13/1995

2. Principal Place of Business

2a. Mailing Address

21 2318 N.E. 8th St.

26 2318 N.E. 8th St.

4. FEI Number

65-0534489

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

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

23 City & State

28 City & State

23 FORT LAUD. FL.

28 FORT LAUD. FL.

24 Zip

25 Country

29 Zip

30 Country

24 33304

25 BROWARD

29 33304

30 BROWARD

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SEILER, JOHN P ESQ.

2900 EAST OAKLAND PARK BOULEVARD

SUITE 200

FORT LAUDERDALE FL 33308

81 Name

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

83

84 City

FL

85 Zip Code

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 typed or printed (Name of registered agent and the corporation)

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

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
FANIZZI, WILLIAM D
STREET ADDRESS
2318 NORTH EAST 8TH STREET
CITY-ST-ZIP
FORT LAUDERDALE FL 33304

TITLE ☐ DELETE

NAME
FANIZZI, WILLIAM D
STREET ADDRESS
2318 NORTH EAST 8TH STREET
CITY-ST-ZIP
FORT LAUDERDALE FL 33304

TITLE ☐ DELETE

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NAME
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CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

21 TITLE ☐ Change ☐ Addition

22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition

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 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 attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

William D. Fanizzi

4/25/96

954-
777-3975

DATE, PHONE #

CR2E034 (12/95)