

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P95000093184 (6)

1. Corporation Name

LEO TOURS INTERNATIONAL, INC.



Principal Place of Business

1147 SEA BREEZE BOULEVARD  
FORT LAUDERDALE FL 33316

Mailing Address

1147 SEA BREEZE BOULEVARD  
FORT LAUDERDALE FL 33316

2. Principal Place of Business

21 1540 NE 191 ST

Suite, Apt. #, etc.  
# 321

City & State

23 N. MIAMI BCH FL

Zip

33179

Country

USA

2a. Mailing Address

26 1540 NE 191 ST

Suite, Apt. #, etc.

# 321

City & State

28 N. MIAMI BCH FL

Zip

33179

Country

USA

3. Date Incorporated or Qualified  
12/07/1995

3a. Date of Last Report  
5-8-96

4. FEI Number

65-0629264

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

10. Name and Address of New Registered Agent

THE LAW FIRM OF LAWRENCE J SPIEGEL CHRTD  
343 ALMERIA AVENUE  
CORAL GABLES FL 33134

81 Name

LEONID PANKOV

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

1540 NE 191 ST # 321

83

84 City

N. MIAMI BCH

FL

85 Zip Code

33179

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

5-23-96

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME  
PSTD  
PANKOV, LEONID R  
STREET ADDRESS  
1147 SEA BREEZE BOULEVARD  
CITY - ST - ZIP  
FORT LAUDERDALE FL 33316

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

PRESIDENT

☐ Change ☒ Addition

1.2 NAME

PANKOV LEONID

1.3 STREET ADDRESS

1540 NE 191 ST # 321

1.4 CITY - ST - ZIP

N. MIAMI BCH FL 33179

2.1 TITLE

VICE-PRESIDENT

☒ Change ☐ Addition

2.2 NAME

GURALNIK ARKADY

2.3 STREET ADDRESS

1540 NE 191 ST # 321

2.4 CITY - ST - ZIP

N. MIAMI BCH FL 33179

3.1 TITLE

SECRETARY

☒ Change ☐ Addition

3.2 NAME

GURALNIK DINA

3.3 STREET ADDRESS

1540 NE 191 ST # 321

3.4 CITY - ST - ZIP

N. MIAMI BCH FL 33179

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

800001844848  
-05/30/96--01077--024

\*\*\*233.75

☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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

Date

Date and Phone