

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

FILED

Apr 24 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 # **P96000019080 (6)**

1. Corporation Name
LEK-COMP, INC.

Principal Place of Business
**12788 GILLARD RD.
WINTER GARDEN FL 34787**

Mailing Address
**12788 GILLARD RD.
WINTER GARDEN FL 34787**



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
02/28/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

4. FEI Number

59-3370258

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

9. Name and Address of Current Registered Agent

**LOWE, LINDA
12788 GILLARD RD.
WINTER GARDEN FL 34787**

10. Name and Address of New Registered Agent

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	DP	<input type="checkbox"/> DELETE
NAME	LOWE, COREY	
STREET ADDRESS	12788 GILLARD RD.	
CITY-ST-ZIP	WINTER GARDEN FL 34787	

TITLE	V	<input type="checkbox"/> DELETE
NAME	LOWE, LINDA	
STREET ADDRESS	12788 GILLARD RD.	
CITY-ST-ZIP	WINTER GARDEN FL 34787	

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Low, Linell	
1.3 STREET ADDRESS	12788 Gillard Rd.	
1.4 CITY-ST-ZIP	Winter Garden, FL 34787	

2.1 TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Low, Chad	
2.3 STREET ADDRESS	1064 Chelsea Parc Cr.	
2.4 CITY-ST-ZIP	Clermont, FL 34711	

3.1 TITLE	DP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Low, Corey	
3.3 STREET ADDRESS	6107 Chantry St.	
3.4 CITY-ST-ZIP	Orlando, FL 32835	

4.1 TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Low, Wade	
4.3 STREET ADDRESS	12788 Gillard Rd.	
4.4 CITY-ST-ZIP	Winter Garden, FL 34787	

5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		

6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 attachment with an address.

SIGNATURE:  **Corey Lowe**

4/20/98

(407) 877-6597

CR2E034 (10/97)