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

PROFIT
CORPORATION
ANNUAL REPORT
1997



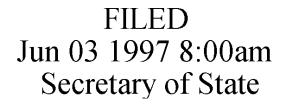
FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000095976 (2)

LECKY'S, INC.



Principal Place of Business Mailing Address	
290 FIRST STREET WEST 290 FIRST STREET WEST TIERRA VERDE FL 33715-1703	
	Date Incorporated or Qualified 3a. Date of Last Report 1/19/1996
2. Principal Place of Business 2a. Mailing Address	4. FEI Number Applied For
21 26 Suite, Apt. #, etc. Suite, Apt. #, etc.	59-39/3887 Not Applicable
22 27	5. Certificate of Status Desired
City & State City & State	6. Election Campaign Financing \$5.00 May Be
28	1 rust Fund Contribution Added to Fees
Country Zip Cou	6. This corporation has industry for interigrate rax under 3. 133.052,
24 25 29 30 30 9. Name and Address of Current Registered Agent	Florida Statutes
MATHESON, ALEX 81 Name	
290 FIRST STREET WEST	32 Street Address (P.O. Box Number is Not Acceptable)
TIERRA VERDE FL 33715	
	33
	34 City FL 85 Zip Code
11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the a	
 Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the a office or registered agent, or both, in the State of Florida. Such change was authorize agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Sta 	by the corporation's board of directors, I hereby accept the appointment as registered
SIGNATURE	ico.
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registere	Agent signature required when reinstating) DATE
12. OFFICERS AND DIRECTORS 13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 E Change Addition
HAME MATHESON, ALEX	
AAA DIDAG ADAGUU II GAT	EET ADDRESS
THE PART OF SAME	/-ST-ZIP
TITLE DELETE 2.1 TI	E Change Addition
NAME 22N	ne i
	EET ADDRESS
	Y-ST-ZIP E Change Addition
TITLE DELETE 3111	
1	EET AODRESS
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TITLE DELETE 4.1 TO	
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TITLE DELETE 6.1 TI	
NAME 6.2 M	
STREET ADDRESS 6.3 S	EET ADDRESS
	The state of the s

4. I do 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 you 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 of responsible empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

CICNATURE.

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