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

PROFIT CORPORATION ANNUAL REPORT

1998

NAME

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000070073 (6)

LEONE COMMERCIAL WALLCOVERING, INC.

Principal Place of Business Mailing Address 2561 MADRID WAY SOUTH 2561 MADRID WAY SOUTH ST PETERSBURG FL 33712 ST PETERSBURG FL 33712 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/13/1997 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 26 Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6, Election Campaign Financing П Trust Fund Contribution Added to Fees 23 28 Zip Country Zıp Country This corporation owes or has paid the current year Intangible Yes 24 29 30 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent g. Name and Address of Current Registered Agent 81 Name CORPORATE CREATIONS ENTERPRISES, INC. 4521 PGA BLVD #211 82 Street Address (P.O. Box Number is Not Acceptable) PALM BEACH GARDENS FL 33418 83 84 Zio 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 approable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE 1.1 TITLE Change Addition TITLE MORALES, ANAYANSI 1.2 NAME NAME 2561 MADRID WAY SOUTH STREET ADDRESS 1.3 STREET ADDRESS **ST PETERSBURG FL 33712** 1.4 CITY - S1 - ZIP CITY-ST-ZIP DELETÉ ☐ Change Addition TITLE 2.1 TITLE LEONE, TODD W NAME 2.2 NAME 2561 MADRID WAY SOUTH STREET ADDRESS 2.3 STREET ADDRESS **ST PETERSBURG FL 33712** CITY-ST-ZIP 2.4 CITY - \$1 - ZIP DELETE ☐ Change \_\_\_ Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Addition Change 4.1 TITLE TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITL€ NAME 52 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5 4 CITY - S1 - ZIP DELETE Addition Change 61 TITLE TITLE

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. If 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 changing, or on an attractment with an address.

6.2 NAME

6.3 STREET ADDRESS

64 CITY - S1 - ZIP

4/12/98

R13 865-0805

**FILED** 

May 08 1998 8:00am

Secretary of State