


**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**May 03, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # J91218**  
1. Entity Name  
**LEYBROS INVESTMENTS CORP.**



Principal Place of Business  
**6950 NW 77TH COURT  
MIAMI, FL 33166**

Mailing Address  
**6950 NW 77TH COURT  
MIAMI, FL 33166**



04272004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**65-0016393** Applied For  
Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

**LEYVA, GIRALDO  
6950 NW 77TH CT  
MIAMI, FL 33166**

**DO NOT WRITE  
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  **\$5.00 May Be  
Trust Fund Contribution. Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP LEYVA, GIRALDO 6950 NW 77TH COURT MIAMI, FL 33166
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP LEYVA, AURELIO 6950 NW 77TH COURT MIAMI, FL 33175
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S LEYVA, HILDA 6950 NW 77TH COURT MIAMI, FL 33166
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T LEYVA, GIRALDO JR 6950 NW 77TH COURT MIAMI, FL 33166
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

1100000148114  
05/03/04-80134-003 158.75

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Hilda Leyva* **Hilda Leyva** 4/28/04 305.5314123  
Signature and Typed or Printed Name of Signing Officer or Director Date Daytime Phone #