

FILED
Jul 18, 2003 8:00 am
Secretary of State

05-02-2003 90146 019 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # **P02000025814**

1. Entity Name
INDIAN SPRINGS DEVELOPMENT CORPORATION



Principal Place of Business
PO BOX 402702
MIAMI BEACH FL 33140

Mailing Address
PO BOX 402702
MIAMI BEACH FL 33140

55051571



2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State

Zip Country

4. FEI Number Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

DE LEON, KIRK D
44 WEST FLAGLER ST STE 325
MIAMI FL 33130

7. Name and Address of New Registered Agent

Name _____

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

City **FL** Zip Code _____

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 _____ (NOTE: Registered Agent signature required when registering) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LYNCH, EVERETT PO BOX 402702 MIAMI BEACH FL 33140	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

12. 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 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: *Sorenth...*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNED OFFICER OR DIRECTOR

4/29/03 305-609-6960
DATE AND TELEPHONE NUMBER

CR2E004 (10/02)

Attachment
LAW OFFICES
DE LEON & DE LEON
A PROFESSIONAL ASSOCIATION

55051571
P02000025814

KIRK D. DE LEON
NEIL A. DE LEON
SIMONE N. CODNER
VIA U. S. MAIL

COURTHOUSE TOWER
44 WEST FLAGLER STREET
SUITE 325
MIAMI, FLORIDA 33130-6812

TELEPHONE: (305) 374-5494
FACSIMILE: (305) 374-5498

July 15, 2003

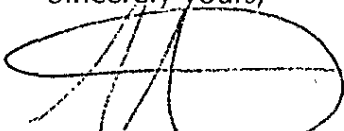
Florida Department of State
Annual Reports Section - Division of Corps.
P. O. Box 1500
Tallahassee, Florida 32302

Re: **Indian Springs Development Corporation**
Reference No.: P02000025814
Our File No.: 189.03

Dear Sir/Madam:

Enclosed is the 2003 Uniform Report filed by Indian Springs Corporation. It was returned in order for us to obtain an EIN number. I am the attorney and registered agent for the corporation. I have applied for the EIN Number and checked that box on the form supplied. It will take approximately 6 weeks for the IRS to mail the EIN Number to us. Therefore I am filing the document prior to receiving the EIN Number. Should you have any questions or comments, please call.

Sincerely yours,



Kirk D. De Leon, Esq.

KDL/jl

Encl.

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