



**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 14, 2007 08:00 AM
Secretary of State

DOCUMENT # P05000099178 1. Entity Name LEABI INTERNATIONAL GROUP INC.	
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Principal Place of Business 2012 SW 131 PL MIAMI, FL 33175	Mailing Address 2012 SW 131 PL MIAMI, FL 33175
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DO NOT WRITE IN THIS SPACE

	
02102007	No Chg-P
CR2E034 (11/05)	
4. FEI Number 20-3150463	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent VAZQUEZ, GEORGINA 2012 SW 131 PL MIAMI, FL 33175	DO NOT WRITE IN THIS SPACE
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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 *Georgina Vazquez* _____ 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, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P,T VAZQUEZ, GEORGINA 2012 SW 131 PL MIAMI, FL 33175
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05/30/07 80036-015-150-00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: *Georgina Vazquez* _____ Date 2-12-07 _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR