

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000085395

FILED  
Apr 25, 2006  
Secretary of State

Entity Name: LL HOLDINGS OF TAMPA, INC.

**Current Principal Place of Business:**

6940 LIONS HEAD LANE  
BOCA RATON, FL 33496

**New Principal Place of Business:**

**Current Mailing Address:**

6940 LIONS HEAD LANE  
BOCA RATON, FL 33496

**New Mailing Address:**

FEI Number: 65-0713699

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LEEDS, MICHAEL  
1733 W. FLETCHER AVE  
TAMPA, FL 33612 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: VSTD ( ) Delete  
Name: LEEDS, MICHAEL  
Address: 1733 WEST FLETCHER AVENUE  
City-St-Zip: TAMPA, FL 33612

Title: PD ( ) Delete  
Name: LEEDS, LEONARD  
Address: 6940 LIONS HEAD LANE  
City-St-Zip: BOCA RATON, FL 33496

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL J. LEEDS

MGR

04/25/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date