

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# J47120

**Entity Name:** LEITER, PEREZ & ASSOCIATES, INC.

**Current Principal Place of Business:**

520 NW 165 STREET ROAD  
SUITE 209  
MIAMI, FL 33169

**Current Mailing Address:**

520 NW 165 STREET ROAD  
SUITE 209  
MIAMI, FL 33169

**FEI Number:** 59-2746730

**Certificate of Status Desired:** Yes

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

LEITER, MARTIN  
520 NW 165 STREET ROAD  
SUITE 209  
MIAMI, FL 33169 US

*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

**Officer/Director Detail :**

Title           PTD  
Name           LEITER, GEOFFREY  
Address        520 NW 165 STREET ROAD, SUITE  
                  209  
City-State-Zip: MIAMI FL 33169

Title           VSD  
Name           LEITER, MARTIN  
Address        520 NW 165 STREET ROAD, SUITE  
                  209  
City-State-Zip: MIAMI FL 33169

Title           VP  
Name           MONTIEL, JOSE  
Address        520 NW 165 STREET ROAD, SUITE  
                  209  
City-State-Zip: MIAMI FL 33169

Title           VP  
Name           SMITH, COLLIE  
Address        520 NW 165 STREET ROAD, SUITE  
                  209  
City-State-Zip: MIAMI FL 33169

Title           VP  
Name           PEREZ, JORGE L  
Address        520 NW 165 STREET ROAD  
                  SUITE 209  
City-State-Zip: MIAMI FL 33169

*I hereby 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 all other like empowered.*

**SIGNATURE:** MARTIN LEITER

VSD

02/01/2016

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date