## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F02000002402

FILED May 05, 2006 Secretary of State

Entity Nai	me: LEA-CIA	NCI, INC.			
Current Principal Place of Business:			New Principal Place of Business:		
	HWEST DRIV LE, CT 06062	Æ			
Current Mailing Address:			New Mailing Address:		
	HWEST DRIV .E, CT 06062	/E			
FEI Number:	: 06-1309937	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of (	Current Registered Agent:	Name and Address o	Name and Address of New Registered Agent:	
LOUREIRO, JULIO 2900 NORTH A2A UNIT 9D FORT PIERCE, FL 34949 US			LOUREIRO, JULIO 2900 NORTH A1A UNIT 9D FORT PIERCE, FL 34	2900 NORTH A1A	
	named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATURE:				05/05/2006	
	Electro	nic Signature of Registered Ag	ent	Date	
		93(2)(b), F.S., the corporation did no	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DP ( LOUREIRO, JE 5 BLUEBERRY CANTON, CT (	/ LANE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V ( ADAMS, JAME 324 HART STF NEW BRITAIN,	REET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S ( CUTLER, BRIA 4 SOMERSET AVON, CT 060	DRIVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name:	D ( LOUREIRO. JU	) Delete JLIO	Title: Name:	( ) Change ( ) Addition	

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.

Address:

City-St-Zip:

SIGNATURE: JEFFREY J. LOUREIRO DP 05/05/2006

2900 NORTH A1A, UNIT 9D

FORT PIERCE, FL 34949

Address:

City-St-Zip: