

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F20683

FILED
Feb 26, 2009
Secretary of State

Entity Name: LEISURE CITY SERVICE CENTER, INC.

Current Principal Place of Business:

29421 SW 152ND AVE.
LEISURE CITY, FL 330332847 US

New Principal Place of Business:

Current Mailing Address:

C/O BLAKESBERG & CO CPAS
951 SW 4TH AVE
BOCA RATON, FL 334325803 US

New Mailing Address:

FEI Number: 59-2083776

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLAKESBERG, WILLIAM
951 SW 4TH AVE
BOCA RATON, FL 334325803 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: P () Delete
Name: LEON, REINALDO,
Address: 29421 S.W. 152ND AVE.
City-St-Zip: LEISURE CITY, FL 330332847

Title: VP () Delete
Name: NIETO, MIRIAM
Address: 29421 SW 152 AVE
City-St-Zip: LEISURE CITY, FL 330332847

Title: S () Delete
Name: LEON, MARTHA
Address: 29421 SW 152 AVE
City-St-Zip: LEISURE CITY, FL 330332847

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: MIRIAM NIETO

VP

02/26/2009

Electronic Signature of Signing Officer or Director

Date