

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 19, 2004 8:00 am**  
**Secretary of State**

04-19-2004 90314 016 \*\*\*150.00

**DOCUMENT # F94000005772**

1. Entity Name  
**LM CAPITAL CORPORATION**



Principal Place of Business  
**1200 N. FEDERAL HIGHWAY  
#312  
BOCA RATON, FL 33432 US**

Mailing Address  
**2918 BANYAN BLVD., CIRCLE N.W.  
BOCA RATON, FL 33431 US**



04092004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**13-3470369**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**CORLEY, LESLIE M  
2918 BANYAN BLVD., CIRCLE N.W.  
BOCA RATON, FL 33431**

**DO NOT WRITE  
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE	CD
NAME	CORLEY, LESLIE M
STREET ADDRESS	2918 BANYAN BLVD., CIRCLE N.W.
CITY-ST-ZIP	BOCA RATON, FL 33431
TITLE	DVP
NAME	CORLEY, RICARDO
STREET ADDRESS	11156 SANDPOINT TERRACE
CITY-ST-ZIP	BOCA RATON, FL 33428
TITLE	P
NAME	CORLEY, LESLIE M
STREET ADDRESS	2918 BANYAN BLVD., CIRCLE N.W.
CITY-ST-ZIP	BOCA RATON, FL 33431
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*Leslie M. Corley*  
**President**  
**April 9, 2004**  
(561) 961-8410