2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # H63963

Entity Name
 LEDETT, INC.



Principal Place of Business Mailing

% GERALD SILVERMAN 25 WEST FLAGLER STREET, SUITE 900 MIAMI, FL 33130 Mailing Address
% GERALD SILVERMAN
25 WEST FLAGLER STREET, SUITE 900
MIAMI, FL 33130

FILED Jan 12, 2004 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For 59-2548022 Not Applied bie

5. Certificate of Status Desired

01082004

\$8.75 Additional Fee Required

CR2E034 (10/03)

5. Name and Address of Current Registered Agent

SILVERMAN, GERALD 25 WEST FLAGLER STREET SUITE 900 MIAMI, FL 33130

SIGNATURE:

DO NOT WRITE IN THIS SPACE

No Chg-P

MIAMI, FL 33130			W IIIO OI AOL		
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 obligati	ons of registered agent.				
SIGNATURE_	Control of the contro	Gunnlingute ASTAT Societare	4 Ament elonopus	required when reinstating?	DATE
Signature, typed or printed name of registered agent and title it applicable. (NOTE, Registered			G Mont a Gualore	sedimen when sensitivity.	===
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		 Election Campaign Finar Trust Fund Contribution. 	ncing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS	1		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PETIT, MARIE 927 NE 72 TERRACE MIAMI, FL				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SILVERMAN, GERALD 25 W FLAGLER ST #900 MIAMI, FL 33130				######################################
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY+ST-ZIP			_	,	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		_			
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 cath; 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.					

Geraus