

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 12, 2007 8:00 am
Secretary of State

03-12-2007 90076 034 ***150.00

DOCUMENT # H66471

1. Entity Name
LEO & JOE'S, INC.



Principal Place of Business

8802 S.R. 52
HUDSON, FL 34667

Mailing Address

8802 S.R. 52
HUDSON, FL 34667

DO NOT WRITE IN THIS SPACE

40032611



01182007 No Chg-P CR2E034 (11/05)

4. FEI Number
59-2553765

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

PSETAS, GEORGE C.
10816 US 19N STE 105
PORT RICHEY, FL 34668

**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, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PVD
PORTERA, LIBORIO
10828 PEPPERTREE LANE
PORT RICHEY, FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VD
PORTERA, STAVROULA 1ST
10828 PEPPERTREE LANE
PORT RICHEY, FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

Liborio Portera, Pres.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #