

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

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

DOCUMENT # J45070

1. Entity Name
LEECO CORP.



Principal Place of Business
**ONE SE THIRD AVE
3050
MIAMI, FL 33131-1768 US**

Mailing Address
**ONE SE THIRD AVE
3050
MIAMI, FL 33131-1768 US**



01052004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2752562	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**ROSENBERG, DONALD S.
ONE SE THIRD AVE
STE 3050
MIAMI, FL 33131**

**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 _____ (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	PTD
NAME	O'NEILL, GEORGE D.
STREET ADDRESS	30 ROCKEFELLER PLZA#5432
CITY- ST- ZIP	NEW YORK, NY

TITLE	VSD
NAME	O'NEILL, ABBY M.
STREET ADDRESS	30 ROCKEFELLER PLZA#5432
CITY- ST- ZIP	NEW YORK, NY

TITLE	V
NAME	ROSENBERG, DONALD S.
STREET ADDRESS	3050 ONE THIRD AVE
CITY- ST- ZIP	MIAMI, FL

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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01/13/04-80017-006 158.75

**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 information.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Donald S. Rosenberg
Donald S. Rosenberg V. Pres 1/6/04 3053582600