


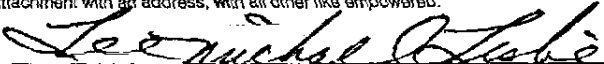


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 10, 2006 08:00 AM
Secretary of State

DOCUMENT # K25590 1. Entity Name MICHAEL LESLIE, P.A.			
Principal Place of Business 2119 W BRANDON BLVD. STE. A BRANDON, FL 33511 US		Mailing Address 2119 W BRANDON BLVD. STE. A BRANDON, FL 33511 US	
DO NOT WRITE IN THIS SPACE			
		04072006 No Chg-P CRZE034 (11/05)	
		4. FEI Number 59-2892942	Applied For Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ROTHMAN, MARK A THE ROTHMAN LAW OFFICES 8814 ROCKY CREEK DR. TAMPA, FL 33615		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, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		 U00000437630 04/22/06-80065-009 150.00 DO NOT WRITE IN THIS SPACE	
TITLE	P		
NAME	LESLIE, LEE MICHAEL		
STREET ADDRESS	2119 W BRANDON BLVD., STE. A		
CITY-ST-ZIP	BRANDON, FL 33511		
TITLE	D		
NAME	LESLIE, LEE MICHAEL		
STREET ADDRESS	2119 W BRANDON BLVD., STE. A		
CITY-ST-ZIP	BRANDON, FL 33511		
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 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: 		Date 4/10/06 Daytime Phone # (813) 624-7811	