

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K62606

FILED
Apr 27, 2006
Secretary of State

Entity Name: LES DEVELOPMENT CORP.

Current Principal Place of Business:

637 DELMONTE CT
KISSIMMEE, FL 34758

New Principal Place of Business:

Current Mailing Address:

637 DELMONTE CT
KISSIMMEE, FL 34758

New Mailing Address:

FEI Number: 65-0096283

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SUAREZ, EMILIANO
637 DELMONTE CT
KISSIMMEE, FL 34758 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SUAREZ, EMILIANO,
Address: 709 S.W. 99TH CIR S.
City-St-Zip: MIAMI, FL

Title: VD () Delete
Name: SUAREZ, LUCY,
Address: 709 S.W. 99TH CIR S.
City-St-Zip: MIAMI, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SUAREZ, EMILIANO,
Address: 637 S. DELMONTE CT.
City-St-Zip: KISSIMMEE, FL 34758 US

Title: VD (X) Change () Addition
Name: SUAREZ, LUCY,
Address: 637 S. DELMONTE CT.
City-St-Zip: KISSIMMEE, FL 34758 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LUCY SUAREZ

VD

04/27/2006

Electronic Signature of Signing Officer or Director

Date