

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000088773

Entity Name: LEAP GROUP III, LLC

FILED
Jul 18, 2005
Secretary of State

Current Principal Place of Business:

201 ALHAMBRA CIRCLE, SUITE 601
C/O MICHAEL ROSENBAUM
CORAL GABLES, FL 33134

New Principal Place of Business:

515 N. FLAGLER DRIVE
SUITE R-517
WEST PALM BEACH, FL 33401

Current Mailing Address:

201 ALHAMBRA CIRCLE, SUITE 601
C/O MICHAEL ROSENBAUM
CORAL GABLES, FL 33134

New Mailing Address:

515 N. FLAGLER DRIVE
SUITE R-517
WEST PALM BEACH, FL 33401

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

GONZALEZ, RODOLFO E
201 ALHAMBRA CIRCLE, SUITE 601
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

GONZALEZ, RODOLFO E
515 N. FLAGLER DRIVE
SUITE R-517
WEST PALM BEACH, FL 33401 US

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: RODOLFO E. GONZALEZ

07/18/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGMB () Change (X) Addition
Name: GONZALEZ, RODOLFO E
Address: 515 N. FLAGLER DRIVE, SUITE R-517
City-St-Zip: WEST PALM BEACH, FL 33401 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: RODOLFO E. GONZALEZ

MGMB

07/18/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date