2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000120448

1. Entity Name LESLIE HAWK, LLC

FILED Apr 24, 2006 8:00 am Secretary of State

8-2006 90009 019 ****50.00

300025682

	03-28
	01092006 Chg-LL0
	4. FEI Number
ountry	5. Certificate of Status De-
Name	7. Name and Address of

3

Principal Place of Business 14101 RACE TRACK ROAD TAMPA, FL 33626		Mailing Address 14101 RACE TRACK ROAD TAMPA, FL 33626			A I A BISTATO			0568		
2. Principal P	tace of Busin	ness	3. Mailing Address	· · ·	•					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01092006	Chg-LLC	CR2E08	3 (11/05)			
City & State		City & State		4. FEI Numb	ber Applied For Applied For Not Applied For					
Zip		Country	Zip	Coun	atry	5. Certificate	e of Status Desired		5.00 Ad ee Require	
	6. Name	and Address of Current	Registered Agent			7. Name an	d Address of New Re	gistered A	gent	
	WHITE BO	ER J DGGS BANKER P.A. LVD., SUITE 1700			Street Addre	ss (P.O. Box Numb	per is Not Acceptable)		
					City			FL	Zip Cod	•
8. The above the obligati	named entity ions of regist	y submits this statement fo ered agent.	r the purpose of changing Its	registere	ed office or regi	stered agent, or bo	oth, in the State of Flor	ida. I am la	milier with,	and accept
SIGNATURE .	Signature, typed	or printed name of registered agent.	and title if applicable. (NOT	É: Plegislare	Id Agent agnesure req	juried when remaining)		DATE		
Filing Fee is \$50.00 Due by May 1, 2006		_				check pa		B		
9.		MANAGING MEMBE	RS/MANAGERS	10.			ADDITIONS/	CHANGES		
DILE		iager	☐ Delete	TITLE	E		•		☐ Change	Addition
NAME	L	liam L. Bisho	-	NAM	E					
STREET ADDRESS		01 Race Trac	k Road		EFT ADDRESS					
CITY-\$1-ZIP	Tan	pa, FL 33626		CITY	-ST-ZIP					
TITLE	Ì		☐ Delete	TITLE	E			Ī	Change	☐ Addition
NAME				NAM	5					
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11. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Rorida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as it made under ceith; that I am a managing member or manager of the limited liability company or the receiver of fusite empowered to execute this report as required by Chapter 608, Rorida Statutes.

SIGNATURE: ___

NAME OF BIGHING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE