## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## Feb 23, 2007 08:00 AM **DOCUMENT # M77556 Secretary of State** 1. Entity Name LEAP CORPORATION Principal Place of Business Mailing Address 9571 NW 45TH STREET 9571 NW 45TH STREET MIAMI, FL 33178 US MIAMI, FL 33178 US No Chg-P 02152007 CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEi Number 52-1368437 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent FERNANDEZ, VICTOR DO NOT WRITE **9571 NW 45TH STREET** MIAMI, FL 33178 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. Signature, typed or printed name of registered agent and tipe if applicable (NOTE: Registered Agent signature required when reinstation) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE 18 \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE FERNANDEZ, VICTOR **9571 NW 45TH STREET** STHEET ADDRESS CITY-ST-ZIP MIAMI, FL 33178 FERNANDEZ, ESPERANZA NAME U00000646033 STREET ADDRESS **9571 NW 45TH STREET** 03/06/07-80014-005 158.75 CITY-ST-ZIP MIAMI, FL 33178 TITLE DELAMATA, ELENA STREET ADDRESS 11340 SW 93 CT DO NOT WRITE CITY-SI-ZIP MIAMI, FL 33176 TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling 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:

CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

VICTO Fermodez Pros

2/14/07

305-463-8015

**FILED** 

Daytime Phone