2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

Mar 26, 2002 8:00 am Secretary of State DOCUMENT # N0100002517 03-26-2002 90034 024 ****61.50 LEON BATTERY, INC. Principal Place of Business Mailing Address 1930 TYLER ST. / 1930 TYLER ST. HOLLYWOOD FL 33020 HOLLYWOOD FL 33020 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For ✔ Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) HILBERTH, KURT ESQ 1930 TYLER ST. HOLLYWOOD, FL 33020 Zip Code City 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to **\$5.00** May Be FILE NOW: FEE IS \$61,25 . Trust Fund Contribution. Added to Fees **Department of State** 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. · Director President (9/01) TITLE □ Delete TITLE Addition KUST HILBERTH NAME NAME STREET ADDRESS STREET ADDRESS 1930 TYLER ST CITY-ST-ZIP CITY-ST-7IP HULLY WOOD & Sirector TITLE ☐ Delete Vice - President ☐ Change stanford Smith NAME NAME 2928 myrtle oak Circle STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP James Rodwell - Secretary ☐ Delete TITLE Addition 9999-4 NW 94 St. NAME NAME STREET ADDRESS STREET ADDRESS MIAMi 33172 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Director Change Addition NAME Kelley STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 33023 ☐ Delete TITLE Addition ☐ Change NAME NAME Bender 79th Terr. N. STREET ADDRESS STREET ADDRESS 5699 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, 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.

HILBERTH

3-14-07 954 925808

FILED