

**2004 NOT-FOR-PROFIT-CORPORATION
ANNUAL REPORT**

FILED
May 05, 2004 8:00 am
Secretary of State

05-05-2004 90227 037 ****61.50

DOCUMENT # N01000002517

1. Entity Name
LEON BATTERY, INC.



Principal Place of Business
**1930 TYLER ST.
HOLLYWOOD, FL 33020**

Mailing Address
**1930 TYLER ST.
HOLLYWOOD, FL 33020**

24070517



DO NOT WRITE IN THIS SPACE

02172004 No Chg-NP CR2E037 (10/03)

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**HILBERTH, KURT ESQ
1930 TYLER ST.
HOLLYWOOD, FL 33020**

**DO NOT WRITE
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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4-28-04

**Filing Fee is \$61.25
Due by May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	HILBERTH, KURT
STREET ADDRESS	1930 TYLER STREET
CITY-ST-ZIP	HOLLYWOOD, FL 33020
TITLE	VPD
NAME	SMITH, SANFORD
STREET ADDRESS	2928 MYRTLE OAK CIRCLE
CITY-ST-ZIP	DAVIE, FL 33328
TITLE	S
NAME	RODWELL, JAMES
STREET ADDRESS	9999-4 NW 9TH STREET
CITY-ST-ZIP	MIAMI, FL 33172
TITLE	D
NAME	KELLEY, KEN
STREET ADDRESS	3141 SW 37TH AVENUE
CITY-ST-ZIP	HOLLYWOOD, FL 33023
TITLE	D
NAME	BENDER, JEFF
STREET ADDRESS	15699 79TH TERR N
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33418
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-28-04

954 9258080