

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 14, 2002 8:00 am
Secretary of State
 03-14-2002 90062 045 ***150.00

MAJOR AV

DOCUMENT # P00000004703

1. Entity Name

L.E.A. INTERNATIONAL, INC.

Principal Place of Business

**6520 HARNEY RD
 TAMPA FL 33610**

Mailing Address

**6520 HARNEY RD
 TAMPA FL 33610**

2. Principal Place of Business

6520 HARNEY RD

Suite, Apt. #, etc.

3. Mailing Address

SAME

Suite, Apt. #, etc.

City & State

TAMPA FL

City & State

TAMPA FL

Zip

33610

Country

Zip

33610

Country

4. FEI Number

65-0974808

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION FL 33324**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing
 Trust Fund Contribution. ☐

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

11. OFFICERS AND DIRECTORS

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **ELLIS, ROGER C**
 CITY-ST-ZIP **765 FINCHLEY ROAD
 LONDON NW 11 8DS, UK FL 33131**

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **PHIPSON, STEPHEN**
 CITY-ST-ZIP **765 FINCHLEY ROAD
 LONDON NW 11 8DS, UK FL 33131**

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **HAYES, PAUL**
 CITY-ST-ZIP **765 FINCHLEY ROAD
 LONDON NW 11 8DS, UK FL 33131**

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **ORME, WALTER**
 CITY-ST-ZIP **765 FINCHLEY ROAD
 LONDON NW 11 8DS, UK FL 33131**

TITLE ☐ Delete
 NAME **CFO**
 STREET ADDRESS **KING, MARK**
 CITY-ST-ZIP **2325 WOODLAWN CIRCLE WEST
 SAINT PETERSBURG FL 33704**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

MARK KING

3-1-02 813-621-1324

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)