2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

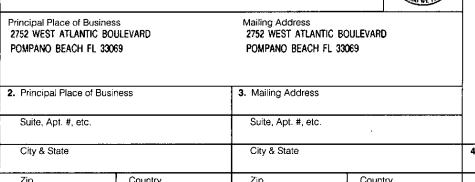
DOCUMENT #

P00000029630

1. Entity Name

LENO REALTY, INC.





FILED Apr 28, 2003 8:00 am Secretary of State

04-28-2003 91414 007 ***150.00

Principal Place of Business 2752 WEST ATLANTIC BOULEVARD POMPANO BEACH FL 33069		Mailing Address 2752 WEST ATLANTIC BOULEVARD POMPANO BEACH FL 33069											
2. Principal Place of Business		3. Mailing Address						IAF BBIFF FAFAL BBI	 			I IIIII EBBI IEBI	
Suite, Apt. #, etc.			Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES						
City & State			City & State				4. FEI Number 65-0993714			_ 	oplied For ot Applicable		
Zip Country			Zip Count			5.	5. Certificate of Status Desired				\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent								ddress of Ne		red Ag	ent		
LENO CH	ADI FO LI		Name										
LENO, CHARLES H 300 SW 29TH TERRACE						Street Address (P.O. Box Number is Not Acceptable)							
	IDERDALE FL 33312												
TONI LAU	DENDALE 1 E 33312					City					Zip Code		
8 The above	named entity submits this statement for	the purp	ose of changing its	registers	od office or	registered an	ant or both	in the State of			niliar with	and accept	
	ons of registered agent.	arc parp	lose of chariging its	registere	o onice or	registered ag	gent, or both,	iii iiic olale o	i i ioriau. I	um jan	illigar eritiri,	uno docept	
SIGNATURE _											*	4 .	
SIGNATURE =	Signature, typed or printed name of registered agent a	nd title if app	licable. (NOTE	: Registered	d Agent signatur	e required when r	einstating)		D	ATE .		1	
, After	LE NOW!!! FEE IS \$150.00 May 1, 2003 Fee will be \$550.00 Payable to Florida Department of	State						tion Campaigr Fund Contrib	_	, 	\$5.0 Added	May Be d to Fees	
1	OFFICERS AND DIRECTORS 11				-	Α[DDITIONS/C	HANGES TO	OFFICERS	AND D	IRECTOR	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST LENO, CHARLES H 300 SW 29 TERRACE FORT LAUDERDALE FL 33312										☐ Change	Addition .	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	-,		□ Delete								Change	Addition	

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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

ELUST: FORED CHARLES H. LEWO 7