

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000044385

Entity Name: LEAKBUSTERS CORP.

FILED  
Apr 29, 2005  
Secretary of State

## Current Principal Place of Business:

1836 WEST AVENUE  
MIAMI BEACH, FL 33139

## New Principal Place of Business:

1423 COLLINS AVENUE  
MIAMI BEACH, FL 33139

## Current Mailing Address:

1836 WEST AVENUE  
MIAMI BEACH, FL 33139

## New Mailing Address:

1540 NE 139TH STREET  
N. MIAMI, FL 33161

FEI Number: 65-1004931

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MORALES, JOSE J  
1540 NE 139TH STREET  
NORTH MIAMI, FL 33161 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: MORALES, JOSE J  
Address: 1540 N.E. 139TH STREET  
City-St-Zip: NORTH MIAMI, FL 33161

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: TREA ( ) Change (X) Addition  
Name: MORALES, DENISE U TREASUR  
Address: 1540 NE 139TH STREET  
City-St-Zip: N. MIAMI, FL 33161

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSE J. MORALES

PD

04/29/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date