

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000106052

Entity Name: L.B.D. OF SOUTH FLORIDA, INC.

FILED  
Apr 29, 2008  
Secretary of State

## Current Principal Place of Business:

15902 SW 138 CT  
MIAMI, FL 33177 US

## New Principal Place of Business:

12955 SW 42 ST #2  
MIAMI, FL 33175 US

## Current Mailing Address:

15902 SW 138 CT  
MIAMI, FL 33177 US

## New Mailing Address:

12955 SW 42 ST #2  
MIAMI, FL 33175 US

FEI Number: 65-1054545

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DELEON, ROBERT O  
15902 SW 138 CT  
MIAMI, FL 33177 US

## Name and Address of New Registered Agent:

DELEON, ROBERT P PRESID  
12955 SW 42 ST #2  
MIAMI, FL 33175 US

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: ROBERT DELEON; PRESIDENT

04/29/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: DELEON, CECILIA O  
Address: 15902 SW 138 CT  
City-St-Zip: MIAMI, FL 33177

Title: O ( ) Delete  
Name: DELEON, ROBERT J  
Address: 12955 SW 42 ST. SUITE 2  
City-St-Zip: MIAMI, FL 33175

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR. (X) Change ( ) Addition  
Name: DELEON, ROBERT J PRESID  
Address: 12955 SW 42 ST #2  
City-St-Zip: MIAMI, FL 33175

Title: O (X) Change ( ) Addition  
Name: DELEON, CECILIA O MNG  
Address: 15902 SW 138 CT  
City-St-Zip: MIAMI, FL 33177

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: ROBERT DELEON; PRESIDENT

MR.

04/29/2008

Electronic Signature of Signing Officer or Director

Date