## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000028003

Title:

Name:

Address:

City-St-Zip:

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PEARSON, JAIR

7016 NW 169TH ST

HIALEAH, FL 33015

Entity Name: LEPLAND, CORPORATION

FILED Jan 27, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 5944 CORAL RIDGE DR CORAL SPRINGS, FL 33076 **Current Mailing Address: New Mailing Address:** 5944 CORAL RIDGE DR CORAL SPRINGS, FL 33076 FEI Number: 65-1085234 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HILDEGARDT, GEMER 12343 N W 53RD ST CORAL SPRINGS, FL 33076 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition GEMER, HILDEGARDT Name: Name: 12343 NW 53RD STREET Address: Address: City-St-Zip: CORAL SPRINGS, FL 33076 City-St-Zip: Title: Title: () Delete (X) Change ( ) Addition Name: MENDILDE, CARMEN T Name: MENDIBLE, CARMEN T **12343 NW 53RD STREET** 12343 NW 53RD STREET Address: Address: CORAL SPRINSG, FL 33076 CORAL SPRINSG, FL 33076 City-St-Zip: City-St-Zip:

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: JAIR PEARSON D 01/27/2005

() Change () Addition