


**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jun 06, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # P01000036803  
 1. Entity Name  
 LEONARD GRAHAM, INC.



Principal Place of Business  
 3360 SPANISH MOSS TERR  
 APT 201  
 FORT LAUDERDALE, FL 33319

Mailing Address  
 3360 SPANISH MOSS TERR  
 APT 201  
 FORT LAUDERDALE, FL 33319



**DO NOT WRITE IN THIS SPACE**

06012005 No Chg-P CR2E034 (10/03)

4. FEI Number  
 65-1093788

Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

GRAHAM, LEONARD  
 3360 SPANISH MOSS TERR  
 FORT LAUDERDALE, FL 33319

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Leonard Graham DATE: 5-1-05

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when rechartering)

**FILE NOW!!! FEE IS \$150.00**  
**Due by September 7, 2005**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTSD GRAHAM, LEONARD 3360 SPANISH MOSS TERR APT 201 LAUDERALE LAKES, FL 33319
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 06/06/05-80005-022 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Leonard Graham DATE: 5-1-05 Daytime Phone #: 954-588-9052

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR