FOR PROFIT CORPORATION 2004
UNIFORM BUSINESS REPORT (UBR)

FILED
May 04, 2004 8:00 am
Secretary of State
05-04-2004 90128 049 ***150.00

DOCUMENT # P01000115081

1. Entity Name

Leehock Corporation

DO NOT WRITE IN THIS SPACE

94084052

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
c/o Silver Garvett & Henkel	
Suite, Apt. #, etc: 1110 Brickell Avenue PH One	Suite, Apt. #, etc.
City & State: Miami, Florida	City & State
Zip: 33131 Country: Miami-Dade	Zip Country

4. FEI Number 43-2009226 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name: Fredric M. Garvett
Street Address (P.O. Box Number is Not Acceptable): 1110 Brickell Avenue - Penthouse One
City: Miami FL Zip Code 33131

DO NOT WRITE IN THIS SPACE

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.

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

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	D	TITLE	
NAME	Ignacio I. Pena	NAME	
STREET ADDRESS	c/o Silver, Garvett & Henkel, P.A. 1110 Brickell Avenue - Penthouse One	STREET ADDRESS	
CITY-ST-ZIP	Miami, Florida 33131	CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
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CITY-ST-ZIP		CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: X Ignacio I. Pena [signature] 04/22/04 786/357-2023

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #