

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000115081

Entity Name: LEEHOCK CORPORATION

FILED
Sep 05, 2005
Secretary of State

Current Principal Place of Business:

9210 WEST CALUSA CLUB DRIVE
MIAMI, FL 33186 US

New Principal Place of Business:

12265 SW 99 ST
MIAMI, FL 33186 US

Current Mailing Address:

9210 WEST CALUSA CLUB DRIVE
MIAMI, FL 33186 US

New Mailing Address:

12265 SW 99 ST
MIAMI, FL 33186 US

FEI Number: 43-2009226

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PEÑA, IGNACIO I MR.
9210 WEST CALUSA CLUB DRIVE
N/A
MIAMI, FL 33186 US

Name and Address of New Registered Agent:

PEÑA, IGNACIO I MR.
12265 SW 99 ST
N/A
MIAMI, FL 33186 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: IGNACIO I. PEÑA

09/05/2005

Electronic Signature of Registered Agent

Date

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: PEÑA, IGNACIO MR.
Address: 9210 WEST CALUSA CLUB DRIVE
City-St-Zip: MIAMI, FL 33186 US

Title: DVPS () Delete
Name: BIANCHI, ANTONIO MR.
Address: CALLE 5, QTA. TRANQUILIDAD, URB. ALTO PRAD
City-St-Zip: CARACAS, VZ N/A VZ

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change () Addition
Name: PEÑA, IGNACIO MR.
Address: 12265 SW 99 ST
City-St-Zip: MIAMI, FL 33186 US

Title: () Change () Addition
Name:
Address:
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.

SIGNATURE: IGNACIO I. PEÑA

PRES

09/05/2005

Electronic Signature of Signing Officer or Director

Date