FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

FILED DOCUMENT # P02000039935 03 DEC 17 AM 10: 26 1. Entity Name SECRETARY OF STATE TALLAHASSEE, FLORIDA Leandry's Painting, Inc. DO NOT WRITE IN THIS SPACE 100025552651 12/17/03--01017--027 **!! 2. Principal Place of Business 3. Mailing Address <u>624 Mesilla Drev</u> Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 02-0606838 Kissimmee, 34758 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 34758 U.S.A 7. Name and Address of Current Registered Agent A1A Corporate Services, DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable)
218 Southern Country IN THIS SPACE ^{City} Quincy Zip Code 32351 8. The above named entity submits this staggment 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 12-11-03 tered agent and utle it applicable. (NOTE: Registered Agent signature required when reinstaling) January 1 - May 1 Fee is \$150.00 9. Election Campaign Financing After May 1, Fee is \$550.00 \$5.00 May Be Amended UBR is \$61.25 Trust Fund Contribution, Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS **PE034B** (12/02) TITLE President THIF NAME. NAME Edgardo L. Leandry STREET ADDRESS STREET ADDRESS 624 Mesilla Drive City-St-7IP CHY#SI-7IP Kissimmee, FL. 34758 mité. TITLE NAME NAME STREET ADDRESS STREET ADDRESS CHY-ST-7IP CITY-ST-7IP THUE TITLE NAME NAME STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY ST-ZIP CITY-ST-ZIP TITLE TITLE IN THIS SPACE MAME MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE . NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY+ST-7iP NAME MARKE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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 10 or on an

SIGNATURE:

attachment with an address

SIGNATURE AND TYPED OR PRINTED NAME OF CHING OFFICER OR DIRECTOR

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321<u>-624-2923</u>/

December 8, 2003

Uniform Business Report Division of Corporations P.O. Box 1500 Tallahassee, FL. 32302-1500

Re: Leandry's Painting, Inc.

To Whom It May Concern:

This letter is in reference to the renewal of Leandry's Painting, Inc.. Due to the fact that the address of the corporation had changed twice we never received neither the first or second document sent to us by the state as indicated by the representative that I spoke to on Monday the 8th of December. She instructed me to send a written letter along with the initial payment of \$ 150.00. Thank you for your cooperation concerning this matter.

Cordially

Edgardo L./Leandry

President