

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 18, 2005 8:00 am**  
**Secretary of State**

03-18-2005 90062 031 \*\*\*150.00

DOCUMENT # P02000083825

1. Entity Name

L.E.R. REAL ESTATE INVESTMENTS INC.



Principal Place of Business

3020 SW 97 CT  
MIAMI FL 33165

Mailing Address

3020 SW 97 CT  
MIAMI FL 33165

2. Principal Place of Business

10075 NW 54 TERR

Suite, Apt. #, etc.

3. Mailing Address

10075 NW 54 TERR

Suite, Apt. #, etc.

City & State

DORAL, FL

Zip

33178

Country

U.S.A.

City & State

DORAL, FL

Zip

33178

Country

U.S.A.

4. FEI Number

05-0524988

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

RODRIGUEZ, LUIS E  
3020 SW 97 CT  
MIAMI FL 33165

7. Name and Address of New Registered Agent

Name RODRIGUEZ, LUIS E.

Street Address (P.O. Box Number is Not Acceptable)

10075 NW 54 TERR

City DORAL

FL

Zip Code

33178

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

*Luis E. Rodriguez* LUIS E. RODRIGUEZ (PRESIDENT) 03-12-05

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2005 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE DP ☐ Delete  
NAME RODRIGUEZ, LUIS E  
STREET ADDRESS 3020 SW 97 CT  
CITY-ST-ZIP MIAMI FL 33165

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DP ☒ Change ☐ Addition  
NAME RODRIGUEZ, LUIS E.  
STREET ADDRESS 10075 NW 54 TERR  
CITY-ST-ZIP DORAL, FL 33178

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Luis E. Rodriguez* LUIS E. RODRIGUEZ 03-12-05 (305) 431-4814

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #