2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2009
Secretary of State

DOCUMENT# P02000122829

Entity Name: CE LEON CONSTRUCTION INC.

Current Principal Place of Business:

9500 ELM FOREST LANE
ORLANDO, FL 32829 US

New Principal Place of Business:

Current Mailing Address:

9500 ELM FOREST
ORLANDO, FL 32829 US

New Mailing Address:

FEI Number: 81-0582605 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEONIDES, CESAR
4431 VISTA WOODS CT.
ORLANDO, FL 32822 US

Name and Address of New Registered Agent:

LEONIDES, CESAR
9500 ELM FOREST
ORLANDO, FL 32829 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: CESAR LEONIDES 04/23/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: LEONIDES, CESAR
Address: 9500 ELM FOREST LANE
City-St-Zip: ORLANDO, FL 32829 US

Title: V ( ) Delete
Name: LEONIDES, CESAR
Address: 9500 ELM FORSET LANE
City-St-Zip: ORLANDO, FL 32829 US

Title: V (X) Delete
Name: GONZALEZ, JESUS
Address: 1925 BARKSDALE DR.
City-St-Zip: ORLANDO, FL 32822

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: LEONIDES, CESAR
Address: 9500 ELM FOREST LANE
City-St-Zip: ORLANDO, FL 32829 US

Title: VP (X) Change ( ) Addition
Name: GONZALEZ, JESUS
Address: 1925 BARKSDALE DRIVE
City-St-Zip: ORLANDO, FL 32822 US

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: CESAR LEONIDES P 04/23/2009
Electronic Signature of Signing Officer or Director Date