## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000027426

FILED Feb 11, 2005 Secretary of State

Entity Name: LEON PROPERTIES AT DORSCHER PLAZA, INC.	
Current Principal Place of Business:	New Principal Place of Business:
9888 MONTCLAIR CIRCLE APOPKA, FL 32703	
Current Mailing Address:	New Mailing Address:
9888 MONTCLAIR CIRCLE APOPKA, FL 32703	
FEI Number: 51-0454177 FEI Number Applied For ( ) FEI Num	nber Not Applicable ( ) Certificate of Status Desired ( )
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
LEON, RAQUEL 9888 MONTCLAIR CIR APOPKA, FL 32202 US	LEON, MAURIZIO 9888 MONTCLAIR CIR APOPKA, FL 32703 US
The above named entity submits this statement for the purpose o in the State of Florida.	f changing its registered office or registered agent, or both,
SIGNATURE: MAURIZIO LEON	02/11/2005
Electronic Signature of Registered Agent	Date
Election Campaign Financing Trust Fund Contribution ( ).	
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: PD () Delete Name: LEON, RAQUEL Address: 9888 MONTCLAIR CIRCLE City-St-Zip: APOPKA, FL 32703	Title: P (X) Change ( ) Addition  Name: LEON, MAURIZIO  Address: 9888 MONTCLAIR CIRCLE  City-St-Zip: APOPKA, FL 32703
Title: ( ) Delete Name: Address: City-St-Zip:	Title: VP () Change (X) Addition Name: MANDARA, MICHELE Address: 3837 LAKE EMMA ROAD City-St-Zip: LAKE MARY, FL 32746
Title: ( ) Delete Name: Address: City-St-Zip:	Title: S ( ) Change (X) Addition  Name: MANDARA, SALVATORE  Address: 3837 LAKE EMMA ROAD  City-St-Zip: LAKE MARY, FL 32746

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: MAURIZIO LEON P 02/11/2005