

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 15, 2004 8:00 am
Secretary of State

07-15-2004 90006 016 ***150.00

DOCUMENT # P03000074852

1. Entity Name
LEOCADIA INC.



Principal Place of Business
**1215 S W 78 COURT
MIAMI, FL 33144**

Mailing Address
**1215 S W 78 COURT
MIAMI, FL 33144**

44048785



2. Principal Place of Business

933 S.W. 78 PLACE

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07062004

Chg-P

CR2E034 (10/03)

City & State

MIAMI FLORIDA

City & State

4. FEI Number

30-0077570

Applied For

Not Applicable

Zip

33144

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**RODRIGUEZ-PORTAS, MARIA
1215 S W 78 COURT
MIAMI, FL 33144**

7. Name and Address of New Registered Agent

Name **MARIA RODRIGUEZ-PORTA**

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

933 S.W. 78 PLACE

City

MIAMI

FL

Zip Code

33144

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

[Signature]

MARIA RODRIGUEZ-PORTA

7/6/04

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
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

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

10. OFFICERS AND DIRECTORS

TITLE **PS** ☐ Delete
NAME **RODRIGUEZ-PORTAS, MARIA**
STREET ADDRESS **1215 S W 78 COURT**
CITY-ST-ZIP **MIAMI, FL 33144**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
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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 **PS** ☒ Change ☐ Addition
NAME **MARIA RODRIGUEZ-PORTA**
STREET ADDRESS **933 S.W. 78 PLACE**
CITY-ST-ZIP **MIAMI, FL 33144**

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

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

TITLE ☐ Change ☐ Addition
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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:

[Signature]

MARIA RODRIGUEZ-PORTAS

7/6/04

305-262-1477

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #