DOCUMENT # P03000149245 1. Entity Name LEO'S FINE TRIM, INC.						FILED Feb 11, 2005 08:00 AM Secretary of State				
Principal Plac	e of Business		Mailing Address	•			Secretar	y of 8	tate	
1098 ALGO DELTONA F			1098 ALGOMA ST. DELTONA FL 32725							
JEE TOTAL	LOLIZO		DELIGNATE 32723							
D Dringland F	Nana of Division		V 2 32 2 4 1							
Z. Mincipai F	Place of Busines	\$\$	3. Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.			1s	st MOORE	CR2E034	(10/04)	
City & State			City & State			4. FEI Numb	20-048445	4		pplied For
Zip	Country		Zip Coun		itry	5. Certificate	of Status Desired	s Desired		ditional
6. Name and Address of Current			ent Registered Agent	Registered Agent		7. Name and Address of New Regis			Fee Require Agent	3G
,					Name		4			
109	RTADO, LE 8 ALGOMA	ST.	Street Address			P.O. Box Numb	per is Not Acceptable	e)		
DELTONA FL 32725										
					City		-	FL	Zip Cod	de
8. The above the obligat	named entity s tions of register	ubmits this statemen	t for the purpose of changing its	register	L ed office or register	red agent, or bo	oth, in the State of Flo		- _f	, and accept
ĈIONIATI IDE										
SIGNATURE,	Signature, typed or	printed name of registered ag	pent and title it applicable (NOTI	E Registere	d Agent signature required	when reinstating)	ч	DATE		
After	May 1, 2005	FEE IS \$150.00 Fee Will Be \$550, lorida Department					9. Election Camp Trust Fund Cor	•	-	.00 May Be
10.	n i dyddio to i		ND DIRECTORS	11.		ADDITIONS	CHANGES TO OFF	ICEDS AND		- - 1 N 1 1 1
THILE	PVST	31110211071	☐ Delete	1171.6		ADDITIONS	TO DANGES TO OFF	ICENS MIN	☐ Change	Addition
NAME	HURTADO, L			NAM						_
STREET ADDRESS 1098 ALGOMA ST. CHY-SI-ZIP DELTONA FL 32725			ı		ET ADORESS -ST-ZIP					
hite	D	- 02.720	□ Delete	TITLE				 -	☐ Change	☐ Additior
NAME	HURTADO, LEONARDO		Li Derete	NAM					Citaliye	
	DORESS 1098 ALGOMA ST.				E) AUDRESS					
CHY-ST-7/P	DELTONA FI	_ 32725		CHY	-S1-ZIP					_
TITLE NAME			☐ Delete	TITLE NAM					Change	Addition Addition
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NAME Street andress				NAM STOL	E ET ADDRECS		U000002 02/11/05-8	25859_		
CITY-ST-ZIP					-SI-7IP		02/11/05-8	0058-0	02 158.	75
TITLE			☐ Delete	Title					☐ Change	Addition
NAME				KAM	· 1					
STREET ADORESS -					ET ADDRESS					
			—————————————————————————————————————		-ST-ZIP				— ••••••	- A 1100
TITLE NAME			☐ Delete	TITLS NAME	į.				☐ Change	Addition
VIREET ADORESS	Market Arrows			SIRE	ET ADOPESS					
CITY+ST-ZIP			··· · · · · · · · · · · · · · · · · ·	CITY	ST-ZIP					
indicated of the cor	on this report of poration or the	ir suppiementai repor recelver or trustee en	vith this filing does not qualify for this true and accurate and that no powered to execute this report	ny signat as recuii	mption stated in Se ture shall have the s red by Chapter 607	ction 119.07(3) same legal effe ', Florida Statute	(i), Florida Statutes. ct as if made under es; and that my nam	further cer oath, that f e appears i	rtify that the i am an office n Block 10 o	nformation or director r Block 11 if
SIGNAT	or on an allacr, و		s, with all other like empowered.	•		1/2005	ノ .		4-30	

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: F