

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 20, 2005 8:00 am
Secretary of State

05-20-2005 90035 012 ***150.00

DOCUMENT # P04000022000 1. Entity Name LESLIE HABER REALTY SERVICES, INC.	
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Principal Place of Business 104 CHESAPEAKE TAMPA, FL 33606	Mailing Address 104 CHESAPEAKE TAMPA, FL 33606
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50053007



2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

05162005 Chg-P CR2E034 (10/03)

4. FEI Number 20-0696586	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent HABER, LESLIE 104 CHESAPEAKE TAMPA, FL 33606		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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, 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 7, 2005

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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HABER, LESLIE 104 CHESAPEAKE TAMPA, FL 33606 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *Leslie Haber* **LESLIE HABER** 4/18/05 8132586711
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #



ATTACHMENT
04000022000
50053007

May 16, 2005


Division of Corporations
Uniform Business Report Filings
P. O. Box 1500
Tallahassee, FL 32302-1500

Re: Leslie Haber Realty Services, Inc.
2005 Uniform Business Report

Dear Sir or Madam:

Taxpayer never received the notice of the 2005 Uniform Business Report. She has enclosed a check for \$150 payable to Department of State. Please abate all penalties and accept her filing.

Sincerely,


Sandra J. Williams, CPA

SW/cs

Sandra J. Williams, C.P.A., P.A.
550 North Reo Street Suite 300 Tampa, Florida 33609-1065
Tel. 813-637-9554 Fax 941-722-6887
4900 Manatee Ave. W. Suite 101 Bradenton, Florida 34209-3859
Tel. 941-722-6887 Fax 941-722-6887
sjwcpa@tampabay.rr.com www.sandrajwilliams CPA.com