## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000120416

Entity Name: LEANNETTE PRESCITI ART AND FAUX, INC.

FILED Aug 16, 2005 Secretary of State

6679 RIGGERS RD LANATANA, FL 33462 6679 RIGGERS RD LANTANA, FL 33462 LANTANA, FL 33462

Current Mailing Address: New Mailing Address:

6679 RIGGERS RD LANATANA, FL 33462 6679 RIGGERS RD LANTANA, FL 33462 LANTANA, FL 33462

FEI Number: 84-1656017 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PRESCITI, LEANNETTE
6679 RIGGERS RD
6679 RIGGERS RD
LANATANA, FL 33462 US
PRESCITI, LEANNETTE
6679 RIGGERS RD
LANTANA, FL 33462 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: LEANNETTE PRESCITI 08/16/2005

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition
Name: PRESCITI, LEANNETTE Name: PRESCITI, LEANNETTE
Address: 6679 RIGGERS RD Address: 6679 RIGGERS RD

 Address:
 6679 RIGGERS RD
 Address:
 6679 RIGGERS RD

 City-St-Zip:
 LANATANA, FL 33462
 City-St-Zip:
 LANTANA, FL 33462

Title: V ( ) Delete Title: V (X) Change ( ) Addition Name: PRESCITI, MICHAEL Name: PRESCITI, MICHAEL

 Name:
 PRESCITI, MICHAEL
 Name:
 PRESCITI, MICHAEL

 Address:
 6679 RIGGERS RD
 Address:
 6679 RIGGERS RD

 City-St-Zip:
 LANATANA, FL 33462
 City-St-Zip:
 LANTANA, FL 33462

Title: ST () Delete Title: () Change () Addition

 Name:
 THOMAS, BARBARA W
 Name:

 Address:
 2305 NW 27 AVE
 Address:

 City-St-Zip:
 BOYNTON BEACH, FL 33462
 City-St-Zip:

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: LEANNETTE PRESCITI P 08/16/2005