

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000149378

Entity Name: LESLIE DORN, P.A.

**FILED**  
**Apr 27, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

2430 CENTERGATE DR  
APT #202  
MIRAMAR, FL 33025

**New Principal Place of Business:**

**Current Mailing Address:**

2430 CENTERGATE DR  
APT #202  
MIRAMAR, FL 33025

**New Mailing Address:**

FEI Number: 20-1802601

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DORN, LESLIE  
2430 CENTERGATE DR  
APT #202  
MIRAMAR, FL 33025 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: DORN, LES  
Address: 2430 CENTERGATE DR APT 202  
City-St-Zip: MIRAMAR, FL 33025

I hereby 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 all other like empowered.

SIGNATURE: LES DORN

PD

04/27/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date