2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000156686

Entity Name: THE LEON INVESTMENT GROUP, INC.

FILED Jan 26, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4001 SANTA BARBARA BLVD - STE 304 602A S. MAIN STREET

NAPLES, FL 34104 #255

CRESTVIEW, FL 32536

Current Mailing Address: New Mailing Address:

4001 SANTA BARBARA BLVD - STE 304 602A S. MAIN STREET

NAPLES, FL 34104 #255

CRESTVIEW, FL 32536

FEI Number: 83-0411865 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:

LEON, RUBEN C 4001 SANTA BARBARA BLVD - STE 304 LEON, RUBEN C 602A S. MAIN STREET

NAPLES, FL 34104 US #255

CRESTVIEW, FL 32536 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: 01/26/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete

Name: LEON, RUBEN C Address: 4001 SANTA BARBARA BLVD - STE 304

City-St-Zip: NAPLES, FL 34104

Title: VPTD () Delete

Name: LEON, SARA

Address: 4001 SANTA BARBARA BLVD - STE 304

City-St-Zip: NAPLES, FL 34104

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition

Name: LEON, RUBEN C

Address: 602A S. MAIN STREET, #255 City-St-Zip: CRESTVIEW, FL 32536

Title: VPTD (X) Change () Addition

Name: LEON, SARA

Address: 602A S. MAIN STREET, #255 City-St-Zip: CRESTVIEW, FL 32536

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: SARA LEON VP 01/26/2007