

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000028299

Entity Name: LBS LEASING, INC

FILED
Jan 17, 2009
Secretary of State

Current Principal Place of Business:

290 SW 97TH TERRACE
PEMBROKE PINES, FL 33025

New Principal Place of Business:

Current Mailing Address:

290 SW 97TH TERRACE
PEMBROKE PINES, FL 33025

New Mailing Address:

FEI Number: 20-2376870

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EIKENBERRY, SANDRA J
290 SW 97TH TERRACE
PEMBROKE PINES, 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: EIKENBERRY, SANDRA J
Address: 290 SW 97TH TERRACE
City-St-Zip: PEMBROKE PINES, FL 33025

Title: VP () Delete
Name: WEXELBAUM, LEE
Address: 4190 7TH AVENUE SW
City-St-Zip: NAPLES, FL 34119

Title: ST () Delete
Name: WEXELBAUM, BILL
Address: 16065 SW 77 TERRACE
City-St-Zip: MIAMI, FL 33193

Title: D () Delete
Name: WEXELBAUM, BERT
Address: 7540 SW 35 ST
City-St-Zip: MIAMI, FL 33155

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: SANDRA J EIKENBERRY

PRES

01/17/2009

Electronic Signature of Signing Officer or Director

_____ Date