## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P05000104684

Entity Name

CARMEN LYDIA LEONARD, P.A.



FILED Mar 05, 2007 08:00 AM Secretary of State

Principal Place of Business

1717 N BAYSHORE DR - # 4046 MIAMI, FL 33132

Mailing Address

1717 N BAYSHORE DR - # 4046 MIAMI, FL 33132



DO NOT WRITE IN THIS SPACE

4. FEI Number		Applied For
20-3231418		Not Applicable
	 AA 75	

5. Certificate of Status Desired

02092007

\$8.75 Additional Fee Required

CR2E034 (11/05)

6. Name and Address of Current Registered Agent

changed, or on an attachment with an address, with all other like

SIGNATURE:

LEONARD, CARMEN L 1717 N BAYSHORE DR - # 4046 MIAMI, FL 33132

## DO NOT WRITE IN THIS SPACE

No Cha-P

	named entity submits this statement for the ploops of registered agent.	ourpose of changing its register	ed office or r	egistered agent, or bo	oth, in the State of Florida I am familiar with, and accept	
SIGNATURE.	Signature, typed or printed name of registered agent and title is	applicable. (NOTE Registere	d Agent signature	required when renstating)	DATE	
		Election Campaign Finar     Trust Fund Contribution.	ncing	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	CTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD LEONARD, CARMEN L 1717 N BAYSHORE DR - # 4046 MIAMI, FL 33132					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					U00000654652 03/13/07-80071-014 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		, ,		IN '	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	·			-		
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under oath, that I am an officer or director						