

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000041870

Entity Name: L.E.I. ENTERPRISES, INC.

FILED  
Mar 19, 2009  
Secretary of State

## Current Principal Place of Business:

1970 E. OSCEOLA PKWY.  
# 13  
KISSIMMEE, FL 34743 US

## New Principal Place of Business:

## Current Mailing Address:

1970 E. OSCEOLA PKWY.  
# 13  
KISSIMMEE, FL 34743 US

## New Mailing Address:

FEI Number: 59-3837906      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COSTALES, LUIS A  
2860 OLD CANOE CREEK RD  
SAINT CLOUD, FL 34772 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: COSTALES, LUIS A  
Address: 2860 OLD CANOE CREEK RD  
City-St-Zip: SAINT CLOUD, FL 34772 US

Title: VP ( ) Delete  
Name: HERNANDEZ, HERIBERTO  
Address: 458 BOXWOOD CT  
City-St-Zip: KISSIMMEE, FL 34743 US

Title: MGR ( ) Delete  
Name: COSTALES, ELVIRA  
Address: 2860 OLD CANOE CREEK RD  
City-St-Zip: SAINT CLOUD, FL 34772

Title: MGMR ( ) Delete  
Name: CANDELARIO, JOSE L  
Address: 145 ALAMEDA DR.  
City-St-Zip: KISSIMMEE, FL 34743

## 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: LUIS COSTALES

P

03/19/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date