

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000055670

FILED
Jan 08, 2008
Secretary of State

Entity Name: GABRIEL LEITE, P.A.

Current Principal Place of Business:

3296 N. FEDERAL HWY
SUITE 11-505
FORT LAUDERDALE, FL 33306 US

New Principal Place of Business:

331 SE 15TH TERRACE
DEERFIELD BEACH, FL 33441 US

Current Mailing Address:

PO BOX 11505
FORT LAUDERDALE, FL 33339 US

New Mailing Address:

FEI Number: 20-8990537 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEITE, GABRIEL
3296 N. FEDERAL HWY.
SUITE 11-505
FORT LAUDERDALE, FL 33306 US

Name and Address of New Registered Agent:

LEITE, GABRIEL
331 SE 15TH TERRACE
DEERFIELD BEACH, FL 33441 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: GABRIEL LEITE

01/08/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LEITE, GABRIEL
Address: 3296 N. FEDERAL HWY SUITE 11505
City-St-Zip: FORT LAUDERDALE, FL 33306 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change () Addition
Name: LEITE, GABRIEL
Address: 331 SE 15TH TERRACE
City-St-Zip: DEERFIELD BEACH, FL 33441 US

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: GABRIEL LEITE

PRES

01/08/2008

Electronic Signature of Signing Officer or Director

Date