## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT **CORPORATION** ANNUAL REPORT

1998



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P92 1. Corporation Name LEONARDO F. BRITO, P.A. P92000010093 (2)

**FILED** Apr 08 1998 8:00am Secretary of State

|--|

Principal Place	e of Business	Mailing Address			n indrinder vin falle febri obsit obsit	BOILL EASAN LIBIT BOILE I	01 <b>08</b> 5511 1081
COOS N.W. 155TH STREET 1800S N.W. 155TH STREET					,		
SUITE B MIANI FL 32016 - MIANI FL 32016 -				DO NOT WRITE IN THIS SPACE			
US		US		ŀ	3. Date Incorporated or Qualified		
					12/08/1992		
<b>— .</b>	lace of Business	2a. Mailing Address	5. 11.0	N	4. FEI Number	A	pplied For
100	1 D1 1014 11 D-0-1		ckell Bay	Drive	65-0376578		lot Applicable
Suite, Apt.	•	Suite, Apt. #. etc.	3000	' l	5. Certificate of Status Desired	7	Additional
City & State	ite 3000	City & State	3000		O. Finalisa Oncoming Classes		beriupel
	iami, FL	28 Miami	FL		<ol><li>Election Campaign Financing Trust Fund Contribution</li></ol>		May Be to Fees
Zip	Country . Put Country	- Zip	Country	¥ .	8. This corporation owes or has		
Zip 33	13 25 Dele USA	7ip 29 33(3)	30 Dec	<u>r</u> usa	Personal Property Tax due Jui	_ `	□No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New I	tegistered Agent	
	ITO, LEONARDO F		81  N	ame			
	05_N.W. 198TH STREET, SUITE B	-	<b>82</b> S	reet Addres	s (P.O. Box Number is Not Accept	abla)	
MIAMI FL 33016					Brickell bay	Brive	
			83	Ste	` <b>3000</b> '		
			84 C	iy 、	1001	85 Zip	Code
11 Durament (	to the provisions of Sections 607.0502	and 607 1508 Florida Sta	tutes the shove as	med corpor	ration submits this statement for the		313 L
office or re	egistered agent, or both, in the State of m amiliar with and accept the obligat	f Florida. Such change wa	s authorized by the	corporation	n's board of directors. I hereby acc	cept the appointment a	s registered
	m amiliar with and acceptant abilgar	ions of, Section 607.0505,	Fiorida Statutes.	F.	12:1	2/15/68	
SIGNATURE	Signaluse typed or printed name of registered agent	and title if applicable (N	IOTE Registered Agent sig	nature required	when reinstating)	DATE	
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTO	RS IN 12
TITLE	PSTD	☐ DELETE	1.1 TITLE			☐ Change	Addition
NAME	BRITO, LEONARDO F		1.2 NAME				
STREET ADDRESS	8005 N.W. 155TH STREET, SU	ATE B	1.3 STREET ADD	RESS			
CITY-ST-ZIP	MIAMI FL 33016	T Street	1.4 CITY-ST-ZII	<u> </u>		[] Observe	☐ Addition
TITLE		☐ DELETE	2.1 TITLE			L. Change	LJ Addition
NAME			2.2 NAME 2.3 STREET ADD	pree			Į
STREET ADDRESS			2.4 CITY-ST-ZI				
CITY-ST-ZIP TITLE		DELETE	3.1 TITLE			Change	Addition
NAME			3.2 NAME				
STREET ADDRESS			3 3 STREET ADD	RESS			
CITY-ST-ZIP			3.4. CITY-ST-Z	Ρ			
TITLE		DELETE	4.1 TITLE			☐ Change	Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET ADD	RESS			
CITY-ST-ZIP		DELETE	4.4 CITY-ST-ZI	-		Change	Addition
TITLE		L DELETE	5.1 TITLE			change	☐ V00(((0))
NAME [			5.2 NAME	DE CC			
STREET ADDRESS			5.3 STREET ADD 5.4 CITY-ST-ZII	1			
TITLE		DELETE	6.1 TITLE			☐ Change	Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADD	RESS			ļ
CITY-ST-ZIP			6.4 CITY - ST - ZI				
14. I hereby c	certify that the information supplied will on this annual report or supplemental	n this filing does not qualify	for the exemption	stated in Se	ection 119.07(3)(i), Florida Statutes	I further certify that the	e information
officer or o	director of the corporation or the received	ver or trustee empowered:	to execute this rep	ort as requir	ed by Chapter 607, Florida Statute	s; and that my name a	opears in
MICOL 197	or Block 13 if changed, or on an attach	ngent with an address.		_	10/10/100	7	I