

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000023321

FILED
Apr 19, 2007
Secretary of State

Entity Name: D'LEON INSURANCE & FINANCIAL SERVICES, INC.

Current Principal Place of Business:

10481 N KENDALL DRIV
SUITE D201
MIAMI, FL 33176 US

New Principal Place of Business:

6080 SW 40 STREET
SUITE 5
MIAMI, FL 33155 US

Current Mailing Address:

10481 N KENDALL DRIVE
SUITE D-201
MIAMI, FL 33176 US

New Mailing Address:

6080 SW 40 STREET
SUITE 5
MIAMI, FL 33155 US

FEI Number: 65-0406032

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARGUELLO, ANA L
8621 SW 93RD CT
MIAMI, FL 33173 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: ARGUELLO, ANA L
Address: 8621 SW 93 CT
City-St-Zip: MIAMI, FL 33173

Title: S () Delete
Name: LIEVANO, CLAUDIA
Address: 11945 SW 100 TERRACE
City-St-Zip: MIAMI, FL 33186

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: ANA L. ARGUELLO

P

04/19/2007

Electronic Signature of Signing Officer or Director

Date