


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 08, 2005 08:00 AM
Secretary of State

DOCUMENT # P93000028472
1. Entity Name
OCEAN LEASING ENTERPRISES, INC.



Principal Place of Business: 7850 NW 64TH ST, MIAMI, FL 33166
Mailing Address: 7850 NW 64TH ST, MIAMI, FL 33166

DO NOT WRITE IN THIS SPACE



01272005 No Chg-P CR2E034 (10/03)

4. FEI Number: 65-0406810 Applied For: Not Applicable
5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
CALDERON, STEVEN
7850 NW 64TH ST.
MIAMI, FL 33166

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.
SIGNATURE: _____ DATE: _____
Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating)

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	CALDERON, STEVEN M
STREET ADDRESS	7850 NW 64TH ST
CITY - ST - ZIP	MIAMI, FL 33166
TITLE	V
NAME	CALDERON, HECTOR
STREET ADDRESS	4907 SW 195 TERRACE
CITY - ST - ZIP	HOLLYWOOD, FL 33029
TITLE	S
NAME	ENRIQUEZ, NIDIA
STREET ADDRESS	7301 SW 100 CT.
CITY - ST - ZIP	MIAMI, FL 33173
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 807, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Steven Calderon* 1-28-05 305-986-1883
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #