2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000065642

Entity Name: DE LEON VAN LINES, INC.

FILED Apr 30, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

12901 NW 113 CT 18459 PINES BLVD.

MIAMI, FL 33178 US 344

PEMBROKE PINES, FL 33029 US

Current Mailing Address: New Mailing Address:

12901 NW 113 CT 18459 PINES BLVD.

MIAMI, FL 33178 US 344

PEMBROKE PINES, FL 33029 US

FEI Number: 65-0519568 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

TAILLADE, KARINA
12901 NW 113 CT
TAILLADE, KARINA
18459 PINES BLVD.

MIAMI, FL 33178 US 344
PEMBROKE PINES, FL 33029 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: 04/30/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

P () Delete Title: P (X) Change () Addition TAILLADE, KARINA Name: TAILLADE, KARINA

 Name:
 TAILLADE, KARINA
 Name:
 TAILLADE, KARINA

 Address:
 12901 NW 113 CT
 Address:
 18459 PINES BLVD., SUITE 344

 City-St-Zip:
 MIAMI, FL 33178
 City-St-Zip:
 PEMBROKE PINES, FL 33178

Title: STD () Delete Title: STD (X) Change () Addition

Name: TAILLAGE, KARINA Name: TAILLADE, KARINA

Address: 12901 NW 113 CT Address: 18459 PINES BLVD., SUITE 344

City-St-Zip: MIAMI, FL 33178 City-St-Zip: MIAMI, FL 33029

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: KARINA TAILLADE P 04/30/2007