

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 24, 2005 8:00 am
Secretary of State

05-24-2005 90122 048 ***550.00

DOCUMENT # P95000028749 1. Entity Name LEEVIIT, INC.	
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Principal Place of Business 1201 U.S. HIGHWAY ONE, SUITE 38 NORTH PALM BEACH, FL 33408	Mailing Address 1201 U.S. HIGHWAY ONE, SUITE 38 NORTH PALM BEACH, FL 33408
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DO NOT WRITE IN THIS SPACE

01272005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3311913	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LANNI, VITTORIO
 7716 STEEPLE CHASE SR
 PALM BEACH GARDENS, FL 33418

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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)

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D LANNI, VITTORIO 7716 STEEPLE CHASE DR PALM BEACH GARDENS, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D LANNI, LEEANN 7716 STEEPLE CHASE DR PALM BEACH GARDENS, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	LANNI, VITTORIO 13456 Miles Standish post Palm Beach Gardens, FL 33418
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, 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: *Vittorio Lanni Pres* Date: 5/19/05 561 Daytime Phone #: 472-4170

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR