

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 07, 2005 8:00 am
Secretary of State

01-07-2005 90015 038 ***158.75

DOCUMENT # P96000032741

1. Entity Name

A. LEON REALTY, INC.



Principal Place of Business

15460 SW 256 ST
HOMESTEAD, FL 33032 US

Mailing Address

15460 SW 256 ST
HOMESTEAD, FL 33032 US

20000412



01042005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0658130

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

QUINTERO, ADOLFO L
15460 SW 256 ST
HOMESTEAD, FL 33032

**DO NOT WRITE
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

ADOLFO L. QUINTERO

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reissuing)

01/05/05

DATE

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 P
NAME QUINTERO, ADOLFO L
STREET ADDRESS 15460 S W 256 ST
CITY-ST-ZIP HOMESTEAD, FL 33032

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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:

ADOLFO L. QUINTERO

01/05/05

305-233-1110

Date

Daytime Phone #