

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 01, 2002 8:00 am**  
**Secretary of State**

04-01-2002 90056 019 \*\*\*150.00

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**DOCUMENT # P96000062917**

1. Entity Name

**LEON INTERNATIONAL CORP.**

Principal Place of Business

**7421 N.W. 54 STREET  
 MIAMI FL 33166  
 US**

Mailing Address

**7421 N.W. 54 STREET  
 MIAMI FL 33166  
 US**

2. Principal Place of Business

**2271 W. 77 ST**

Suite, Apt. #, etc.

3. Mailing Address

**2271 W. 77 ST**

Suite, Apt. #, etc.

City & State

**MIAMI FL**

City & State

**MIAMI FL**

Zip

**33016**

Country

Zip

**33016**

Country

4. FEI Number

**65-0679325**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**LEON, ALEJANDRO  
 7421 N.W. 54 STREET  
 MIAMI FL 33166**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00  
 After May 1, 2002 Fee will be \$550.00  
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

**\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete  
 NAME **LEON, ALEJANDRO**  
 STREET ADDRESS **341 NW 151ST AVE**  
 CITY-ST-ZIP **PEMBROKE PINES FL 33028**

TITLE **V** ☐ Delete  
 NAME **ROVIS, GIULIANO**  
 STREET ADDRESS **9550 NW 8TH CIRCLE**  
 CITY-ST-ZIP **PLANTATION FL 33324**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☒ Change ☐ Addition  
 NAME  
 STREET ADDRESS **10977 GOLDEN EAGLE CR.**  
 CITY-ST-ZIP **PLANTATION FL 33324**

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**Jose A. Leon**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**3-20-02**

Date

**305-5580495**

Daytime Phone #

CR2E034 (9/01)