

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000061616

FILED  
Feb 11, 2008  
Secretary of State

Entity Name: LENIET TWO CORPORATION

**Current Principal Place of Business:**

11605 SW 147TH AVE  
MIAMI, FL 331963386

**New Principal Place of Business:**

**Current Mailing Address:**

BLAKESBERG & CO CPAS  
951 SW 4TH AVE.  
BOCA RATON, FL 334325803

**New Mailing Address:**

FEI Number: 65-0910659      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BLAKESBERG, WILLIAM  
951 SW 4TH AVE.  
BOCA RATON, FL 334325803 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: S ( ) Delete  
Name: LEON, REINALDO  
Address: 29421 S.W. 152ND AVENUE  
City-St-Zip: LEISURE CITY, FL 330332847

Title: T ( ) Delete  
Name: LEON, MARTHA  
Address: 29421 SW 152ND AVENUE  
City-St-Zip: LEISURE CITY, FL 330332847

Title: P ( ) Delete  
Name: NEITO, MIRIAM  
Address: 29421 S.W. 152ND AVENUE  
City-St-Zip: LEISURE CITY, FL 330332847

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: MIRIAM NIETO

P

02/11/2008

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date