

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 23, 2001 8:00 am
Secretary of State
05-23-2001 91181 002 ***150.00

DOCUMENT # P99000082172
1. Entity Name
LEOS Export, Inc

Principal Place of Business Mailing Address
9420 S.W 15 Street 9420 S.W 15 Street
Miami, FL 33174 Miami, FL 33174-3034

2. Principal Place of Business 3. Mailing Address
Suite, Apt. #, etc. Suite, Apt. #, etc.
City & State City & State
Zip Country Zip Country

4. FEI Number 65-0948091
Applied For Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
Curbeio, Leonila
9420 S.W 15 Street
Miami, FL 33174

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!! After MAY 1, 2001 Make Check Payable FEE IS \$150.00 Fee will be \$550.00 to Department of State
10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY-ST-ZIP
PD Curbeio, Leonardo 9420 S.W 15 Street Miami, FL 33174
TD Curbeio, Maria 9420 S.W 15 Street Miami, FL 33174
VD Curbeio, Leonila 9420 S.W 15 Street Miami, FL 33174
SD Curbeio, JR, Leonardo 9420 S.W 15 Street Miami, FL 33174

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP
Change Addition
Change Addition
Change Addition
Change Addition
Change Addition

13. I hereby certify that the information supplied with this filing does not qualify for an 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 11 or Block 12 if changed, or on an attachment with an address, with another like empowered.

SIGNATURE: Leonardo Curbeio - President Date: 05/20/01 (305) 229-0003
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR Daytime Phone #

CR2E034 (11/00)