2000 UNIFORM BUSINESS REPORT (UBR)

7/2

FILED
Aug 29, 2000 8:00 am
Secretary of State
07-28-2000 90145 001 ***150.00

DO NOT WRITE IN THIS SPACE

DOCUMENT # P99000086840

1. Entity Name
LEECRIS ENTERPRISE EAST, INC.

Principal Place of Business	Mailing Address
7667 N WICKHAM RD, APT 1513 MELBOURNE FL 32940	7667 N WICKHAM RD, APT 1513 MELBOURNE FL 32940

2. Principal Place of Business	3. Mailing Address
7667 N. wickham Road	7667 N. wickham Rd
Suite, Apt. #, etc. 1513	Suite, Apt. #, etc. 1513.
City & State melbourne FL.	City & State melbourne FL.
Zip 32940-7941 Country Brevard	Zip 32940-7941 Country Brevard

4. FEI Number 59-3617787 ~~15000-088807-78~~ ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DURSO, BETTY
7667 N WICKHAM RD, APT 1513
MELBOURNE FL 32940

7. Name and Address of New Registered Agent

Name: Betty Durso
Street Address (P.O. Box Number is Not Acceptable): 7667 N. wickham Rd. ste. 1513
City: melbourne FL Zip Code 32940

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 $550.00
After SEPTEMBER 13, 2000 Min. will be $750.00
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			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DURSO, BETTY 7667 N WICKHAM RD, APT 1513 MELBOURNE FL 32940	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E034 (5/00)

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Betty Durso (SIGNATURE REQUIRED) July 5/2000 321-751-1062
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #