

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S47962

Entity Name: J.J. LEO CORPORATION

FILED
Apr 27, 2008
Secretary of State

Current Principal Place of Business:

25400 US HWY 19 NORTH
SUITE 170
CLEARWATER, FL 33763 US

New Principal Place of Business:

243 ARBOR DRIVE EAST
PALM HARBOR, FL 34683 US

Current Mailing Address:

25400 US HWY 19 NORTH
SUITE 170
CLEARWATER, FL 33763 US

New Mailing Address:

PO BOX 891
PALM HARBOR, FL 34682

FEI Number: 59-3061447

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAPLAN, JODI L
243 ARBOR DRIVE EAST
PALM HARBOR, FL 34683 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: DCP () Delete
Name: KAPLAN, JODI
Address: 243 ARBOR DRIVE, EAST
City-St-Zip: PALM HARBOR, FL 34683

Title: DVS () Delete
Name: KAPLAN, JODI,
Address: 243 ARBOR DRIVE EAST
City-St-Zip: PALM HARBOR, FL 34683

Title: T () Delete
Name: KAPLAN, JODI,
Address: 243 ARBOR DRIVE EAST
City-St-Zip: PALM HARBOR, FL 34683

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: JODI KAPLAN

MS

04/27/2008

Electronic Signature of Signing Officer or Director

Date