## 2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F16000001786

Entity Name: LESCHACO, INC.

Feb 25, 2019 Secretary of State 9687062229CC

**FILED** 

## **Current Principal Place of Business:**

3105 NW 107TH AVENUE SUITE 504 DORAL, FL 33172

## **Current Mailing Address:**

3105 NW 107TH AVENUE SUITE 504 DORAL, FL 33172 US

FEI Number: 13-2981321 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

OLIVEIRA, AMANDA 3105 NW 107TH AVENUE SUITE 504 DORAL, FL 33172 US

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: AMANDA OLIVEIRA 02/25/2019

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PRESIDENT Title D

Name MALAMBRI, MARK C Name MARRIOTT, JESSICA L

Address 15355 VANTAGE PARKWAY WEST Address 2170 ASHLEY PHOSPHATE ROAD

SUITE 240 SUITE 240

City-State-Zip: HOUSTON TX 77032 City-State-Zip: NORTH CHARLESTON SC 29406

Title S Title CT

NameDIGIACINTO, JOSEPH WNameCONRAD, JOERGAddress235 MAIN STREETAddressKAP-HORN-STR. 18City-State-Zip:WHITE PLAINS NY 10601City-State-Zip:BREMEN, 28237

TitleVCTitleFINANCE DIRECTORNameOESTREICH, OLIVERNamePOEHL, SEBASTIAN

Address KAP-HORN-STR. 18 Address 15355 VANTAGE PARKWAY WEST

SUITE 240

City-State-Zip: BREMEN 28237 City-State-Zip: HOUSTON TX 77032

I hereby 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 all other like empowered.

SIGNATURE: SEBASTIAN POEHL

FINANCE DIRECTOR

02/25/2019