2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 194297

1. Entity Name
LASS CORPORATION

FILED
Mar 05, 2004 08:00 AM
Secretary of State

Principal Place of Business	Mailing Address
6105 SW 55TH CT DAVIE, FL 33314	6105 SW 55TH CT DAVIE, FL 33314

02272004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-6064254
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

LANE,BERNY C
6105 SW 55TH CT
FORT LAUDERDALE, FL 33314

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	LANE, BERNY C
STREET ADDRESS	6105 SW 55TH CT
CITY-ST-ZIP	FT LAUDERDALE, FL 00000,
TITLE	D
NAME	LANE, KATHY C
STREET ADDRESS	6105 SW 55TH CT
CITY-ST-ZIP	FT LAUDERDALE, FL 00000,
TITLE	DP
NAME	LANE, BERNY C
STREET ADDRESS	6105 SW 55TH CT
CITY-ST-ZIP	FT LAUDERDALE, FL 00000,
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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03/05/04-80041-005 150.00

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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Berny Lane Pres March 2 2004
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #