

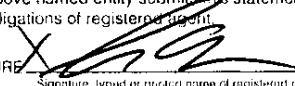
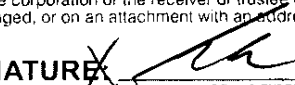


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 28, 2008 8:00 am**  
**Secretary of State**

04-28-2008 90349 038 \*\*\*150.00

<b>DOCUMENT # F74865</b> 1. Entity Name HALL, LAMB AND HALL, P.A.																											
Principal Place of Business % ANDREW C. HALL 1428 BRICKELL AVE., 8TH FLOOR MIAMI, FL 33131		Mailing Address % ANDREW C. HALL 1428 BRICKELL AVE., 8TH FLOOR MIAMI, FL 33131																									
2. Principal Place of Business - No P.O. Box # 2665 So. Bayshore Drive Suite, Apt. #, etc. Penthouse One City & State Miami, Florida Zip 33133		3. Mailing Address Same Suite, Apt. #, etc. City & State Miami, Florida Zip 33133																									
																											
		02132008    Chg-P    CR2E034 (12/06)																									
4. FEI Number 59-2181515		Applied For Not Applicable																									
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																											
6. Name and Address of Current Registered Agent  HALL, ANDREW C. 1428 BRICKELL AVE., 8TH FLOOR MIAMI, FL 33131		7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable) 2665 So. Bayshore Drive Penthouse One City Miami    FL    Zip Code 33133																									
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  Andrew C. Hall    4/24/08    DATE																											
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2008 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																									
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">TITLE</td> <td style="width:40%;">PD</td> <td style="width:30%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>HALL, ANDREW C</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>1428 BRICKELL AVE, PM</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>MIAMI, FL 33131</td> <td></td> </tr> </table>		TITLE	PD	<input type="checkbox"/> Delete	NAME	HALL, ANDREW C		STREET ADDRESS	1428 BRICKELL AVE, PM		CITY-ST-ZIP	MIAMI, FL 33131		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">TITLE</td> <td style="width:40%;"></td> <td style="width:30%; text-align: right;"><input checked="" type="checkbox"/> Change    <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>2665 So. Bayshore Drive, Penthouse One</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>Miami, Florida 33133</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>		TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	2665 So. Bayshore Drive, Penthouse One		STREET ADDRESS	Miami, Florida 33133		CITY-ST-ZIP		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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  Andrew C. Hall		4/24/08    (305) 374-5030    DAY																									