2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2012
Secretary of State

DOCUMENT# J34469

Entity Name: L. J. L. MFG., INC.

Current Principal Place of Business:

5453 NW 24TH STREET
SUITE 2
MARGATE, FL 33063 US

New Principal Place of Business:

Current Mailing Address:

5453 NW 24TH STREET
SUITE 2
MARGATE, FL 33063 US

New Mailing Address:

FEI Number: 59-2724701 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LOUSAING, ALFRED S.
5453 NW 24TH STREET
SUITE 2
MARGATE, FL 33063 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

OFFICERS AND DIRECTORS:

Title: DP
Name: LOUSAING, ALFRED S.
Address: 5453 NW 24TH STREET, SUITE 2
City-St-Zip: MARGATE, FL 33063

Title: V
Name: LOUSAING, ALFRED M.
Address: 5453 NW 24TH STREET, SUITE 2
City-St-Zip: MARGATE, FL 33063

Title: TS
Name: LOUSAING, FELICIA
Address: 5453 NW 24TH STREET, SUITE 2
City-St-Zip: MARGATE, FL 33063

Title: D
Name: KING, DEBORAH E
Address: 5453 NW 24TH STREET, SUITE 2
City-St-Zip: MARGATE, FL 33063

Title: D
Name: LEELUM, ALOMA A
Address: 5453 NW 24TH STREET, SUITE 2
City-St-Zip: MARGATE, FL 33063

Title: D
Name: LOUSAING, DERRICK E
Address: 5453 NW 24TH STREET, SUITE 2
City-St-Zip: MARGATE, FL 33063

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: ALFRED S. LOUSAING DP 04/30/2012

Electronic Signature of Signing Officer or Director Date