

**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000104254

**FILED**  
**Apr 27, 2005**  
**Secretary of State**

**Entity Name:** LAGUN ENTERTAINMENT CORP.

**Current Principal Place of Business:**

6790 NW 186TH STREET  
#318  
HIALEAH, FL 33015

**New Principal Place of Business:**

**Current Mailing Address:**

6790 NW 186TH STREET  
#318  
HIALEAH, FL 33015

**New Mailing Address:**

**FEI Number:** 14-1896217      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SELMO, FEDERICO  
6790 NW 186TH STREET  
#318  
HIALEAH, FL 33015 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: P ( ) Delete  
Name: SELMO, FEDERICO  
Address: 6790 NW 186TH STREET #318  
City-St-Zip: HIALEAH, FL 33015

Title: V ( ) Delete  
Name: ORFOIS, PAOLA  
Address: 6790 NW 186TH STREET #318  
City-St-Zip: HIALEAH, FL 33015

Title: D ( ) Delete  
Name: GALLEGO, ENRIQUE  
Address: 6790 NW 186TH STREET #318  
City-St-Zip: HIALEAH, FL 33015

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: V (X) Change ( ) Addition  
Name: ORFOIS, PAOLA  
Address: 943 NW 106 AVE CIRCLE  
City-St-Zip: MIAMI, FL 33172

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T ( ) Change (X) Addition  
Name: SELMO, HANY  
Address: 6790 NW 186 ST #318  
City-St-Zip: HIALEH, FL 33015

I hereby certify that the information supplied with this filing does not qualify for the 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 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: FEDERICO SELMO

P

04/27/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date