2004 LIMITED LIABILITY COMPANY ANNUAL REPORT **DOCUMENT # L02000006518** 1. Entity Name LAWSON REAL ESTATE, LLC Mailing Address Principal Place of Business 943 VAN BUREN STREET 943 VAN BUREN STREET HOLLYWOOD, FL 33019 HOLLYWOOD, FL 33019 03242004 No Chg-LLC DO NOT WRITE IN THIS SPACE

FILED Mar 31, 2004 08:00 AM Secretary of State



CR2E083 (10/03)

Daytime Phone #

4. FEI Number 30-0055557	-	Applied For Not Applicable
Certificate of Status Desired	\$5.00	Additional

6. Name and Address of Current Registered Agent

LAWSON, JOHN E 943 VAN BUREN STREET HOLLYWOOD, FL 33019

the obligations of registered agent.

SIGNATURE:

DO NOT WRITE IN THIS SPACE

SIGNATURE.	Signature, typed or printed name of registered agent and vite if applicable	(NOTE Registered Agent signature required when reinstaling)	DATE		
F	lling Fee is \$50.00 ue by May 1, 2084				
9,	MANAGING MEMBERS/MANAGERS		เย้า เก็บเกิดดว่าคร		
TITLE NAME STREET ADDRESS CITY ST-ZIP	MGRM LAWSON, JOHN E SR 943 VAN BUREN ST HOLLYWOOD, FL 33019		U6)0000799746 03/31/04-80018-023 50.00		
TRILE NAME STREET ADDRESS CITY-ST-ZIP		4			
TITLE NAME STREET ADDRESS CHY-ST-ZIP		DO	NOT WRITE		
TITLE NAME STREET ADDRESS CHY-ST-ZIP		IN.	THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CHY-ST-ZIP			·		
11. Thereby 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 is true and accurate and that my signature shall have the same legal effect as if made under path; that I am a managing member or manager of the					

Kowson

AND TYPED OR PRINTED HAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

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