2004 FOR PROFIT CORPORATION

FILED

ANNUAL REPORT			Apr 29, 2004 08:00 A			
DOCUMENT # P00000113 1. Entity Name LAGOMATT, INC.	474			Sec	cretary (of State
icipal Place of Business 24 W. FOREST HILL BLVD., STE. 22, #251 LUNGTON, FL 33414 Mailing Address 1924 W. FOREST HILL BLVD., STE. 22, #251 WELLINGTON, FL 33414					liki itemi idman 25561 dewo	I TOWN IN STRUCTURE OF THE STRUCTURE OF
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6. Name and Address of Current Registered Agent HARRINGTON, JOHNNY 1924 W. FOREST HILL BLVD., STE. 22, #251 WELLINGTON, FL 33414				NOT W		
The above named entity submits this statement for the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent a	<u> </u>	ed office or register	, i ,	oth, in the State of Fk	orida. I am familiai	r with, and accept
FILE NOWIII FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Final Trust Fund Contribution.		~ _ +	.00 May Be ed to Fees	U00000 04/29/04-	0139936 -80141-016	150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS			27	NOT W		
CHY-SY-ZIP TITLE NAME	<u> </u>					

12. I hereby certify that the information supplied with this filling 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: _

STREET ADDRESS CITY-ST-ZIP

ME OF SIGNING OFFICER OR DIRECTOR