

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000001454

FILED
Apr 17, 2008
Secretary of State

Entity Name: LAKAY FINANCIAL INTERNATIONAL, INC.

Current Principal Place of Business:

8912 S COMMERCIAL AVENUE
CHICAGO, IL 60617

New Principal Place of Business:

4621 LAKE WORTH RD
GREENACRES, FL 33463

Current Mailing Address:

P.O. BOX 2252
FORT PIERCE, FL 34954

New Mailing Address:

FEI Number: 35-2252808

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JACOB, FRANÇOIS
9529 SHADOW LANE
FORT PIERCE, FL 34951 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: PC () Delete
Name: FRANCOIS, JACOB
Address: P.O. BOX 2252
City-St-Zip: FORT PIERCE, FL 34954

Title: VP () Delete
Name: FATON, FRANCOIS
Address: P.O. BOX 2252
City-St-Zip: FORT PIERCE, FL 34954

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: FATON FRANCOIS

PR

04/17/2008

_____ Electronic Signature of Signing Officer or Director

_____ Date