

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000000280

Entity Name: LASER GARDEN INC.

FILED
Apr 29, 2008
Secretary of State

Current Principal Place of Business:

1600 GULF BLVD SUITE 417
CLEARWATER, FL 33767

Current Mailing Address:

1600 GULF BLVD SUITE 417
CLEARWATER, FL 33767

New Principal Place of Business:

1600 GULF BLVD
SUITE 417
CLEARWATER, FL 33767

New Mailing Address:

1600 GULF BLVD
SUITE 417
CLEARWATER, FL 33767

FEI Number: 36-4374847

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HADEY, JAMES H DR.
1600 GULF BLVD
414
CLEARWATER, FL 33767 US

Name and Address of New Registered Agent:

MARIA, GEORGE
1600 GULF BLVD
417
CLEARWATER, FL 33767 US

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: MARIA GEORGE

04/29/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: HADEY, JAMES H
Address: 1600 GULF BLVD. SUITE414
City-St-Zip: CLEARWATER, FL 33767

Title: D () Delete
Name: GEORGE, MARIA
Address: 1600 GULF BLVD SUITE 417
City-St-Zip: CLEARWATER, FL 33767

Title: PVC () Delete
Name: GEORGE, PETER
Address: 1600 GULF BLVD SUITE 417
City-St-Zip: CLEARWATER, FL 33767

Title: D (X) Delete
Name: LYGNOS, MICHAEL
Address: 115 SOUTH NEWPORT AVENUE
City-St-Zip: TAMPA, FL 33606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change () Addition
Name: FUDENS, DR. JOHN H
Address: 1600 GULF BLVD. SUITE 417
City-St-Zip: CLEARWATER, FL 33767

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

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: MARIA GEORGE

D

04/29/2008

Electronic Signature of Signing Officer or Director

Date