

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J34469

Entity Name: L. J. L. MFG., INC.**Current Principal Place of Business:**1400 CORAL RIDGE DR
#319
CORAL SPRINGS, FL 33071**Current Mailing Address:**1400 CORAL RIDGE DR
#319
CORAL SPRINGS, FL 33071 US**FEI Number:** 59-2724701**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LOUSAING, ALFRED S.
1400 CORAL RIDGE DR
#319
CORAL SPRINGS, FL 33071 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	PD
Name	LOUSAING, ALFRED S.
Address	1400 CORAL RIDGE DR #319
City-State-Zip:	CORAL SPRINGS FL 33071

Title	TD
Name	LOUSAING, FELICIA
Address	1400 CORAL RIDGE DR #319
City-State-Zip:	CORAL SPRINGS FL 33071

Title	SD
Name	LEELUM, ALOMA A
Address	1400 CORAL RIDGE DR #319
City-State-Zip:	CORAL SPRINGS FL 33071

Title	D
Name	LOUSAING, ALFRED M.
Address	1400 CORAL RIDGE DR #319
City-State-Zip:	CORAL SPRINGS FL 33071

Title	D
Name	KING, DEBORAH E
Address	1400 CORAL RIDGE DR #319
City-State-Zip:	CORAL SPRINGS FL 33071

Title	D
Name	LOUSAING, DERRICK E
Address	1400 CORAL RIDGE DR #319
City-State-Zip:	CORAL SPRINGS FL 33071

I hereby 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 all other like empowered.

SIGNATURE: ALFRED S LOUSAING

PD

04/30/2013

Electronic Signature of Signing Officer/Director Detail_____
Date