

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P13000051700

**Entity Name:** L & M FACILITIES CORP.

**Current Principal Place of Business:**

4801 SW 201 TERRACE  
SOUTHWEST RANCHES, FL 33332

**Current Mailing Address:**

4801 SW 201 TERRACE  
SOUTHWEST RANCHES, FL 33332

**FEI Number:** 37-1735638

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CRUZ-GOMEZ, MARIO P  
861 NW 208TH DR.  
PEMBROKE PINES, FL 33029 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 D/P  
Name CRUZ-GOMEZ, MARIO P  
Address 4801 SW 201 TERRACE  
City-State-Zip: SOUTHWEST RANCHES FL 33332

Title DIRECTOR  
Name QUIRANTES, LAURA  
Address 4801 SW 201 TERRACE  
City-State-Zip: SOUTHWEST RANCHES FL 33332

*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:** MARIO P CRUZ-GOMEZ

D/P

02/12/2015

Electronic Signature of Signing Officer/Director Detail

Date