2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 07, 2005 08:00 AM Secretary of State

Daytime Phone #

Date

DOCUMENT # 216928	Secretary of State
1. Entity Name LAP CORP	
Principal Place of Business BERNIE C LANE 6105 S W 55 COURT FORT LAUDERDALE, FL 33314 Mailing Address BERNIE C LANE 6105 S W 55 COURT FORT LAUDERDALE, FL 33314	
DO NOT WRITE IN THIS SPACE	03042005 No Chg-P CR2E034 (10/03) 4. FEI Number Applied For S9-0882983 Not Applicable 5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent LANE,BERNY C 6105 SW 55 COURT FORT LAUDERDALE, FL 33314	DO NOT WRITE IN THIS SPACE
8. The above named entity submits this statement for the purpose of changing its registered office or the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable THOTE Registered Agent signature.	
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees
TITLE PD LANE, BERNY C STREET ADDRESS 6105 SW 55TH CT. CITY-ST-ZIP FORT LAUDERDALE, FL TITLE D LANE, KATHY STREET ADDRESS 6105 SW 55TH CT. CITY-ST-ZIP FORT LAUDERDALE, FL TITLE D LANE, KATHY STREET ADDRESS 6105 SW 55TH CT. CITY-ST-ZIP FORT LAUDERDALE, FL TITLE D LANE, KATHY STREET ADDRESS 6105 SW 55TH CT. CITY-ST-ZIP FORT LAUDERDALE, FL TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	U00000252813 03/07/05-80009-021 150.00 DO NOT WRITE IN THIS SPACE
NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemption state indicated on this report or supplemental report is true and accurate and that my signature shall ha of the corporation of the receiver or trustee empowered to execute this report as required by Chap changed, or on an attachment with an address, with all other like suppowered.	ed in Section 119.07(3)(1), Florida Statutes. I further certify that the information tive the same legal effect as if made under oath; that I am an officer or director officer 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR