


**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 14, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # 274098**  
 1. Entity Name  
 LYNN-MAR APARTMENTS, INC.



Principal Place of Business 1422 HAYES STREET APT. 2 HOLLYWOOD, FL 33020 US	Mailing Address 1422 HAYES STREET APT. 2 HOLLYWOOD, FL 33020 US
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**DO NOT WRITE IN THIS SPACE**



03072005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-1023868	Applied For Not Applicable
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5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
 ROCHA, MARY  
 1422 HAYES STREET  
 APT. 15  
 HOLLYWOOD, FL 33020

**DO NOT WRITE IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent Signature required when reinstating)

**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

10. OFFICERS AND DIRECTORS

TITLE P	AGUADO, ERNESTO 1422 HAYES STREET APT. 2 HOLLYWOOD, FL 33020
TITLE DS	DESTASIO, FERN 1422 HAYES ST. APT. 12 HOLLYWOOD, FL 33020
TITLE T	SANDERS, PATRICIA 1422 HAYES STREET APT. 13 HOLLYWOOD, FL 33020
TITLE D	ROCHE, MARY 1422 HAYES STREET APT. 15 HOLLYWOOD, FL 33020
TITLE D	CURLY, DAVID 1422 HAYES STREET APT. 16 HOLLYWOOD, FL 33020
TITLE D	ALESSI, ALIENE 1422 HAYES STREET APT. 5 HOLLYWOOD, FL 33020

**DO NOT WRITE IN THIS SPACE**

03/14/05-80045-004 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jan G. DeLeon 4/10/05 954-929-2420  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #