2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 288855

City-St-Zip:

SEBRING, FL 33872 US

FILED Feb 24, 2007 Secretary of State

Entity Name: LOROD ENTERPRISES LTD INC						
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
101 SWALLOW AVENUE SEBRING, FL 33872 US			129	3751 HWY 27 SOUTH 129 SEBRING, FL 33870 US		
Current Mailing Address:			New Maili	New Mailing Address:		
	THOMAS WAY BURG, VA 231	85 US				
FEI Number:	65-0056066	FEI Number Applied For ()	FEI Number Not Appli	icable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:		
RODRIGUEZ, RAMON 101 SWALLOW AVENUE SEBRING, FL 33872 US			3751 HWY 129	RODRIGUEZ, RAMON 3751 HWY 27 SOUTH 129 SEBRING, FL 33870 US		
The above in the State	named entity s of Florida.	ubmits this statement for the pu	ırpose of changing it	ts registered o	office or registered agent, or both,	
SIGNATURE:				02/24/2007		
Election Can		c Signature of Registered Ager Trust Fund Contribution ().	nt		Date	
		· ·	ADDITION	SICHANGES	TO OFFICEDS AND DIDECTORS	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	` '		Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address: City-St-Zip:	P/D () I RODRIGUEZ III, 2636 SIR THOM, WILLIAMSBURG	AS WAY	Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address: City-St-Zip:			Title: Name: Address: City-St-Zip:		·	
Title: Name: Address:	VP/D () I RODRIGUEZ JR 101 SWALLOW		Title: Name: Address:		() Change ()Addition IR, RAMON MR. SOUTH, #129	

I hereby certify that the information supplied with this filing does not qualify for the 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.

City-St-Zip:

SEBRING, FL 33870 US

SIGNATURE: DR. RAMON RODRIGUEZ III P/D 02/24/2007