2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 321688

Entity Name: LOTSPEICH CO. OF FLORIDA, INC.

FILED Apr 28, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
6351 NORTHWEST 28 WAY STE A				
FT LAUDERDALE, FL 33309 US				
Current Mailing Address:			New Mailing Address:	
STE A	THWEST 28 WAY RDALE, FL 33309			
FEI Number:	59-1171393 F	El Number Applied For () FEI No	umber Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:				
FEE, DAVID H 6351 NORTHWEST 28 WAY STE A FT LAUDERDALE, FL 33309 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				
Election Campaign Financing Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CEO () Dele FEE, DAVID 2782 NE 27TH STRI FORT LAUDERDALI	EET	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	VP () Dele LIGON, JERRY 2600 SPANISH RIVE BOCA RATON, FL	ER ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	PRES () Dele FEE, MICHAEL 2440 NE 26TH AVE FORT LAUDERDALI		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	VP () Dele FEE, JEFF 6351 NW 28TH WA' FORT LAUDERDALI	/, SUITE A	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	VP () Dele TRIBBLE, MARK 6351 NW 28TH WA' FORT LAUDERDALI	/, SUITE A	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	VP () Dele GORDON, ROBERT 6351 NW 28TH WA' FORT LAUDERDALI	7, SUITE A	Title: Name: Address: City-St-Zip:	() Change () Addition

SIGNATURE: DAVID H FEE CEO 04/28/2008

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