2008 FOR PROFIT CORPORATION

FILED May 05, 2008 08:00 AN State

ANNUAL REPORT					Secretary of S			
1. Entity Nam	MENT # 549005 D A. LANDAU, INC.	•					ictary or S	
410 E. HALL Suite 202	Mailing Address ALLANDALE BEACH BLVD. 2 410 E. HALLANDALE BEACH BL 2 SUITE 202 ALE, FL 33009 HALLANDALE, FL 33009		LVD.					
DO NOT WRITE IN THIS SPA			CE	04292008	No Chg-P	CR2I	E034 (11/05)	
_	O NOT WINTE	III IIIIO OI A	OL.	4. FEI Numb 59-177	=		Applied For Not Applicable	
				5. Certificate	of Status Desired		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent								
LANDAU, RICHARD A. 410 E. HALLANDALE BEACH BLVD., SUITE 202			DO NOT WRITE					
HALLAND	ALE, FL 33009			IN T	THIS SP	AC	E	
the obligat	named entity submits this statement for thi tions of registered agent.	e purpose of changing its register	Led office or register	red agent, or bo	th, in the State of Flo	rida. I ai	m familiar with, and accept	
SIGNATURE.	Signature, typed or printed name of registered agent and t	tie if applicable, (NOTE: Registers	d Agent signature required	I when reinstating)		DATE		
FILE NOWIII FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00				.00 May Be ed to Fees				
10.	OFFICERS AND DIF	ECTORS						
TITLE NAME STREET ADDRESS	PSTD LANDAU, RICHARD A. 410 HALLENDALE BEACH BŁVD.,	SUITE202			Uonoo	09482	229 47-001 150.00	
CITY-ST-ZIP	HALLANDALE, FL 33009				05/02/08	-8004	47-001 150.00	
NAME STREET ADDRESS CITY-ST-ZIP								
TITLE NAME					_			
STREET ADDRESS CITY-ST-ZIP				DO	NOT W	RIT	E	
TITLE			1	IN '	THIS SF	PAC	E	

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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:

NAME STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4 30 08