

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

**Jan 07, 2005 08:00 AM
Secretary of State**

| | |
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| DOCUMENT # 646311 |  |
| 1. Entity Name LAZOWICK, INC. | |

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|---|---|
| Principal Place of Business 2849 NE 24ST FORT LAUDERDALE, FL 33305 US | Mailing Address 2849 NE 24ST FORT LAUDERDALE, FL 33305 US |
|---|---|

DO NOT WRITE IN THIS SPACE

01042005 No Chg-P CR2E034 (10/03)

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|---|-------------------------------|
| 4. FEI Number 59-1953119 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |

6. Name and Address of Current Registered Agent

LAZOWICK, STEWART
2849 NE 24TH ST
FORT LAUDERDALE, FL 33305

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 reappointing)

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| FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 | 8. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
|---|---|

10. OFFICERS AND DIRECTORS

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|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PO LAZOWICK, STEWART 2849 NE 24TH ST FORT LAUDERDALE, FL 33305 |
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01/07/05-80010-019 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Stewart Lazowick **1/4/2005** **954-563-4951**
SIGNATURE, TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #