



2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2005 08:00 AM
Secretary of State

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| DOCUMENT # 679679 1. Entity Name L R 3 ENTERPRISES, INC. |  |
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| Principal Place of Business 1535 N. MIATLAND AVE. MAITLAND, FL 32751-3317 | Mailing Address 1535 N. MIATLAND AVE. MAITLAND, FL 32751-3317 |
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DO NOT WRITE IN THIS SPACE

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|  | |
| 01252005 No Chg-P | CR2E034 (10/03) |
| 4. FEI Number 59-2025250 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> | \$8.75 Additional Fee Required |

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| 6. Name and Address of Current Registered Agent REGISTER, LLOYD E 1535 N. MAITLAND AVE. MAITLAND, FL 32751 | DO NOT WRITE IN THIS SPACE |
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

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| FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
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| 10. OFFICERS AND DIRECTORS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | PCD REGISTER, LLOYD E 507 FORESTWOOD CT. MAITLAND, FL |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | DST PACE, ERICK 1535 N MAITLAND AVENUE MAITLAND, FL |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | DV REGISTER, LLOYD E IV 1535 N. MAITLAND AVENUE MAITLAND, FL |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
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DO NOT WRITE
IN THIS SPACE

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01/28/05-80004-025 158.75

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: Erick Pace 1/25/05 407-260-2220

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #