

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 22, 2008 8:00 am
Secretary of State

02-22-2008 90020 018 ***150.00

DOCUMENT # 686362

1. Entity Name
LATL, INC.



Principal Place of Business Mailing Address

**3801 PGA BLVD
 STE 107
 PALM BEACH GARDENS FL 33410
 US**

**3801 PGA BLVD
 STE 107
 PALM BEACH GARDENS FL 33410
 US**



2. Principal Place of Business - No P.O. Box # 3. Mailing Address

3535 Military TRAIL **3535 Military TRAIL**

Suite, Apt. #, etc. Suite, Apt. #, etc.

Suite 101 **Suite 101**

1st MOORE CR2E034 (10/07)

City & State City & State

Jupiter, FL **Jupiter, FL**

4. FEI Number Applied For

52-1196210 Not Applicable

Zip Country Zip Country

33458 **USA** **33458** **USA**

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**HYMAN, SHERRY L ESQ
 3801 PGA BLVD
 STE 107
 PALM BEACH GARDENS FL 33410**

7. Name and Address of New Registered Agent

Name: _____

Street Address (P.O. Box Number is Not Acceptable):
3535 Military TRAIL

Suite 101

City: **Jupiter** State: **FL** Zip Code: **33458**

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 reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing \$5.00 May Be Added to Fees

Trust Fund Contribution.

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
PD	FRANKEL, THOMAS	3801 PGA BLVD, STE 107	PALM BEACH GARDENS FL 33410	<input type="checkbox"/>
VASD	FRANKEL, ANDREW	3801 PGA BLVD, STE 107	PALM BEACH GARDENS FL 33410	<input type="checkbox"/>
DT	FRANKEL, THOMAS	3801 PGA BLVD, STE 107	PALM BEACH GARDENS FL 33410	<input type="checkbox"/>
SD	KLEIN, ELIZABETH FRAN	3801 PGA BLVD, STE 107	PALM BEACH GARDENS FL 33410	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete	Change	Addition
		3535 Military TRAIL #101	Jupiter, FL 33458	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
		3535 Military TRAIL #101	Jupiter, FL 33458	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
		3535 Military TRAIL #101	Jupiter, FL 33458	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
		3535 Military TRAIL #101	Jupiter, FL 33458	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: _____ DATE: _____ DAYTIME PHONE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR