2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000005458

5850 WEST OGDEN AVE

CICERO, IL 608048378

Address: City-St-Zip:

Entity Name: LAKESHORE EXHIBIT SERVICE. INC

FILED Jul 03, 2007 Secretary of State

Littly Nai	HE. LANLOH	ORE EXHIBIT SERVICE, INC.			
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
9402 AMERICAN EAGLE WAY ORLANDO, FL 328378378			SUITE # 200	9402 AMERICAN EAGLE WAY SUITE # 200 ORLANDO, FL 328378378	
Current M	ailing Addres	ss:	New Mailing Address	New Mailing Address:	
9402 AMERICAN EAGLE WAY ORLANDO, FL 328378378			SUITE # 200	9402 AMERICAN EAGLE WAY SUITE # 200 ORLANDO, FL 328378378	
FEI Number:	36-3525528	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
MAZARCHUK, ROBERT J 9402 AMERICAN EAGLE WAY ORLANDO, FL 328378378 US			9402 AMERICÁN EAGI SUITE # 200	MAZARCHUK, ROBERT J 9402 AMERICAN EAGLE WAY SUITE # 200 ORLANDO, FL 328378378 US	
	named entity of Florida.	submits this statement for the pu	urpose of changing its registered	office or registered agent, or both,	
SIGNATURE:				07/03/2007	
Electronic Signature of Registered Agent			nt	Date	
		3(2)(b), F.S., the corporation did not g Trust Fund Contribution ().	receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CP (WOLF, CARL 5850 WEST OC CICERO, IL 60		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	VS (ZUKER, LARR' 5850 WEST O CICERO, IL 60	GDEN AVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	V () Delete RICK	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: ROBERT J. MAZARCHUK GM 07/03/2007