

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 17, 2004 8:00 am
Secretary of State

07-29-2004 90012 007 ***550.00

DOCUMENT # F93000005529

1. Entity Name
LAN SOLUTIONS, INC.



Principal Place of Business
**320 CARLETON AVE., STE. 3800
CENTRAL ISLIP, NY 11722**

Mailing Address
**320 CARLETON AVE., STE. 3800
CENTRAL ISLIP, NY 11722**

66432077



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07202004

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number

11-3005258

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**GOLDSTEIN, MICHAEL A
5310 N.W. 33RD AVE., STE. 118
FORT LAUDERDALE, FL 33309**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

5300 NW 33rd Ave, Ste 108

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution.

☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **SCHULMAN, RICHARD A**
STREET ADDRESS **320 CARLETON AVE., STE. 3800**
CITY-ST-ZIP **CENTRAL ISLIP, NY 11722**

TITLE **VP** ☐ Delete
NAME **GOLDSTEIN, MICHAEL A**
STREET ADDRESS **5310 NW 33RD AVE, STE 118**
CITY-ST-ZIP **FT LAUDERDALE, FL 33309**

TITLE **VP** ☐ Delete
NAME **BARAT, ROQUE**
STREET ADDRESS **10520 N.W. 26 ST., BLDG. C, STE. 201A**
CITY-ST-ZIP **MIAMI, FL 33172**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **5300 NW 33rd Ave, Ste 108**
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **10520 NW 26th St, Bldg C, Ste 202**
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RICHARD SCHULMAN, PRES

8-11-04

Date

631-422-5267

Daytime Phone