
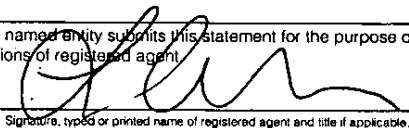
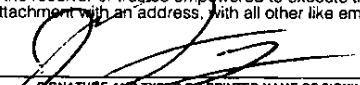


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 11, 2008 8:00 am**  
**Secretary of State**

04-11-2008 90029 005 \*\*\*150.00

<b>DOCUMENT # H42954</b> 1. Entity Name <b>PARK LAKE, INC.</b>					
Principal Place of Business <b>3184 W HALLANDALE BCH BLVD PEMBROKE PARK, FL 33009 US</b>			Mailing Address <b>3184 W HALLANDALE BCH BLVD PEMBROKE PARK, FL 33009 US</b>		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent  <b>SCIME, SANTO 413 LAKE SHORE DR PEMBROKE PARK, FL 33009</b>				7. Name and Address of New Registered Agent Name <b>BECKER &amp; POLIAKOFF</b> Street Address (P.O. Box Number is Not Acceptable) <b>3111 STERLING RD</b> City <b>FT LAUDERDALE</b> <b>FL</b> Zip Code <b>33312</b>	
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: <b>3/19/08</b> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BERARDI, WILLIAM 524 LAKE SHORE DR PEMBROKE PARK, FL 33009	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SCIME, SANTO 413 LAKE SHORE DR. PEMBROKE PARK, FL 33009	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BOURASSA, JEAN CLAUDE 118 KEY DR N PEMBROKE PARK, FL 33009	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BOUCHARD, GILLES 123 MARINE CIRCLE PEMBROKE PARK, FL 33009	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DENIS, GAUTREAU 115 E LIGHTHOUSE CT PEMBROKE PARK, FL 33009	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CAPRA, JACQUES 326 LAKE SHORE DR PEMBROKE PARK, FL 33009	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	GILLES JOANNETTE 107 KEY DRIVE SOUTH PEMBROKE PARK, FL 33009				
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:  <b>J-C. BOURASSA</b> <b>03/17/08</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

PARK LAKE INC OFFICERS AND DIRECTORS CONTINUED

DIRECTOR  
DI VINCENZO, JOSEPH  
100 KEY COURT NORTH  
PEMBROKE PARK, FL 33009

DIRECTOR  
LALONDE, REJEAN  
494 MARINE LAKE DR  
PEMBROKE PARK, FL 33009

DIRECTOR  
ST LAURENT, EDDY  
146 MARINE CIR  
PEMBROKE PARK, FL 33009

ATTACHMENT  
40064572  
#A42954