2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 03, 2008 08:00 AN ıte

Daylime Phone #

DOCUMENT # H69602 1. Entity Name L.O.M.S., INC.						Secretary of Sta			
Principal Place C/O ALEX A. DI 2780 E. OAKLI FORT LAUDERI	OW AND PARK	BLVD.					I	I I FIBIS BIRU BURU BURU BURU BURU	
2. Principal Pla	ice of Busin	ess - No P.O. Box #	3. Mailing Add						
Suite, Apt. #,	, etc.			Suite, Apt. #, etc.			Chg-P	CR2E034 (12/06)	
City & State			City & State				er 33907		oplied For ot Applicable
Zŧp		Country	Zıp			5. Certificate of Status Desired \$8.75 Additional Fee Required			
	6. Name	and Address of Curre	nt Registered Agent		Name	7. Name and	Address of New F	Registered Agent	
	ÓAKLAN	AM ID PARK BLVD. E, FL 33306		Street Address		(P.O. Box Numb	er is Not Acceptable	е)	
					City			FL Zip Cod	e
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 acceptability and provided agent. SIGNATURE Signature, typed or printed name of injurisdict agent and table if applicable (NOTE-Registered Agent signature required when renstating) DATE									
FILE After May	NOW!!!-	FEE IS \$150.00 - 3 Fee will, be \$550		on Campaign Fina Fund Contribution	~ _ ~	5.00 May Be ded to Fees			
10.		OFFICERS AN	ID DIRECTORS	11		ADDITIONS	· · · · · · · · · · · · · · · · · · ·	ICERS AND DIRECTOR	
NAME STREET ADDRESS 2	2626E. O/	CH, WILLIAM AKLAND PK. BLVD ERDALE, FL		NA Sti	ILE ME REET ADDRESS IY-ST-ZIP	U00000879755 Change — Addition 04/15/08-80033-005 150.00			
	PD				TLF	THE COLUMN TWO IS NOT		☐ Change	Addition
STREET ADDRESS		EX A AKLAND PARK BLVI UDERDALE, FL	D.	ST	ME REET ADDRESS IY-SI-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				NA Sti	ILE ME REET ADDRESS IY-ST-ZIP			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	, i			NA ST	ILE ME REET ADDRESS IY-ST-ZIP			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				NA St	TLE AME REET ADDRESS IY-ST-ZIP			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	31,1	part Peters		NA ST	ILE ME REET ADDRESS IY-ST-ZIP			☐ Change	Addition
indicated o	on this repor oration or the or on an atta	nt or supplemental reporter receiver or trustee en achment with an addres	t is true and accurate apowered to execute	and that my sign this report as req rnpowered.	ature shall have the uired by Chapter 60	same legal effe	ct as if made under	I further certify that the i oath; that I am an officer to appears in Block 10 o	or director