


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 23, 2008 8:00 am**  
**Secretary of State**

01-23-2008 90011 004 \*\*\*150.00

**DOCUMENT # J03947**  
 1. Entity Name  
 LORI-GOLD ENTERPRISES, INC.



Principal Place of Business  
 1410 CLEVELAND RD  
 MIAMI BEACH, FL 33141

Mailing Address  
 1410 CLEVELAND RD  
 MIAMI BEACH, FL 33141

**DO NOT WRITE IN THIS SPACE**

40008101



01112008 No Chg-P CR2E034 (11/05)

4. FEI Number  
 59-2644972 Applied For  
 Not Applicable

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

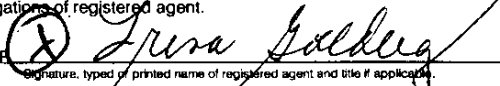
6. Name and Address of Current Registered Agent

~~CLICKMAN PHILLIP~~  
~~605 IVES DAIRY RD 6403~~  
~~N MIAMI BCH, FL 33179~~

TRINA Goldberg  
 1410 Cleveland Rd.  
 Miami Beach, FL  
 33141

**DO NOT WRITE IN THIS SPACE**

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:  (NOTE: Registered Agent signature required when reinstating) DATE: 1/18/08

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

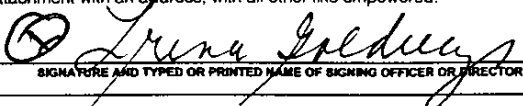
9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP GOLDBERG, TRINA P. 1410 CLEVELAND RD MIAMI, FL 33141
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LORING, NANCY 907 N SHORE DRIVE MIAMI, FL 33141
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

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:  DATE: 1/18/08 DAYTIME PHONE #