

**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# J47215

Entity Name: L.A. RUST, INC.

**FILED**  
**May 02, 2005**  
**Secretary of State**

**Current Principal Place of Business:**

10231 NW 53ST  
SUNRISE, FL 33351 US

**New Principal Place of Business:**

**Current Mailing Address:**

6642 NW 97LN  
PARKLAND, FL 33076 US

**New Mailing Address:**

FEI Number: 59-2776320      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

OCAMPO, JUAN  
6642 NW 97 LN  
PARKLAND, FL 33076 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: OCAMPO, JUAN  
Address: 6642 N.W. 97 LN  
City-St-Zip: PARKLAND, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

SIGNATURE: JUAN OCAMPO

PD

05/02/2005

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date