

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J62025

Entity Name: L.D.G. INDUSTRIES, INC.

FILED  
Apr 28, 2009  
Secretary of State

## Current Principal Place of Business:

4822 NO FEDERAL HWY  
FORT LAUDERDALE, FL 33308 US

## New Principal Place of Business:

## Current Mailing Address:

4822 NO FEDERAL HWY  
FORT LAUDERDALE, FL 33308 US

## New Mailing Address:

FEI Number: 59-2801927

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DIGIOVANNA, LAWRENCE  
3080 HOLIDAY SPRING BLVD  
BLDG 15 APT 111  
MARGATE, FL 33063 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: DIGIOVANNA, LAWRENCE  
Address: 3080 HOLIDAY SPR. BLVD BLD ATP 111  
City-St-Zip: MARGATE, FL 33063

Title: VD ( ) Delete  
Name: DIGIOVANNA, LAURA  
Address: 3080 HOLIDAY SPRING BLV BLD APT111  
City-St-Zip: MARGATE, FL 33063

Title: SD ( ) Delete  
Name: DIGIOVANNA, VICTORIA  
Address: 3080 HOLIDAY SPRINGS BLV BLD APT 111  
City-St-Zip: MARGATE, FL 33063

Title: TD ( ) Delete  
Name: DIGIOVANNA, FRANK  
Address: 3080 HOLIDAY SPRING BLV BLD APT 111  
City-St-Zip: MARGATE, FL 33063

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: LAWRENCE DIGIOVANNA

PRES

04/28/2009

Electronic Signature of Signing Officer or Director

Date