

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000008064

Entity Name: LAWSON HOLDINGS, LLC

FILED
May 04, 2007
Secretary of State

Current Principal Place of Business:

9120 NW 96TH ST
MIAMI, FL 33178

New Principal Place of Business:

Current Mailing Address:

9120 NW 96TH ST
MIAMI, FL 33178

New Mailing Address:

FEI Number: 74-3082312 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

LAWSON, JOHN E SR
943 VAN BUREN STREET
HOLLYWOOD, FL 33019 US

Name and Address of New Registered Agent:

LAWSON, JOHN E JR
19308 NW 14 ST
PEMBROKE PINES, FL 33029 US

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: JOHN E LAWSON JR

05/04/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM (X) Delete
Name: LAWSON, JOHN E SR
Address: 943 VAN BUREN ST.
City-St-Zip: HOLLYWOOD, FL 33019

Title: MGRM () Delete
Name: LAWSON, JOHN E JR
Address: 19308 NW 14ST
City-St-Zip: HOLLYWOOD, FL 33029

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: LAWSON, JOHN E JR
Address: 19308 NW 14ST
City-St-Zip: PEMBROKE PINES, FL 33029

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JOHN E LAWSON JR

MGRM

05/04/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date