

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000039365

Entity Name: L & A CONSULTING LLC

FILED
May 01, 2008
Secretary of State

Current Principal Place of Business:

3300 PGA BLVD., STE. 410
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

5100 PGA BLVD 2ND FLOOR
PALM BEACH GARDENS, FL 33418

Current Mailing Address:

3300 PGA BLVD., STE. 410
PALM BEACH GARDENS, FL 33410

New Mailing Address:

5100 PGA BLVD 2ND FLOOR
PALM BEACH GARDENS, FL 33418

FEI Number: 20-0306225 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:

FEINGOLD, DAVID
3300 PGA BLVD., STE. 410
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

FEINGOLD, DAVID
5100 PGA BLVD 2ND FLOOR
PALM BEACH GARDENS, FL 33418 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: _____

Electronic Signature of Registered Agent

05/01/2008

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ZAUSNER, LEMORE
Address: 3300 PGA BLVD., STE. 410
City-St-Zip: PALM BEACH GARDENS, FL 33410

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ZAUSNER, LEMORE
Address: 5100 PGA BLVD 2ND FLOOR
City-St-Zip: PALM BEACH GARDENS, FL 33418

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: LEMORE ZAUSNER

MRGM

05/01/2008

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