

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 04, 2005 8:00 am
Secretary of State

03-11-2005 90054 049 ****50.00

DOCUMENT # L04000035123					
1. Entity Name L & S ENTERPRISES OF SOUTH FLORIDA, LLC					
Principal Place of Business 3511 VILLAGE BLVD. #402 WEST PALM BEACH, FL 33409 US			Mailing Address 3511 VILLAGE BLVD. #402 WEST PALM BEACH, FL 33409 US		
2. Principal Place of Business 7915 S. Congress Ave. Ste D Suite, Apt. #, etc. <i>Suite D</i>			3. Mailing Address Same		
City & State Lake Worth, FL			City & State Same		
Zip 33461		Country USA		4. FEL Number 51-0507765	
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent SOLOMON, LYNN D 324 DATURA STREET SUITE 235 WEST PALM BEACH, FL 33401			7. Name and Address of New Registered Agent Name: <i>Lynn Solomon</i> Street Address (P.O. Box Number is Not Acceptable): 7915 S. Congress Ave. Ste D City: <i>Lake Worth</i> FL Zip Code: <i>33461</i>		
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)					
Filing Fee is \$50.00 Due by May 1, 2005		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SOLOMON, LYNN 324 DATURA STREET, SUITE 235 WEST PALM BEACH, FL 33401	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LUCHEY, ANDREW 4915 SOUTH CONGRESS AVENUE LAKE WORTH, FL 33461	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LUCHEY, ANDREW 4915 SOUTH CONGRESS AVENUE LAKE WORTH, FL 33461	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LUCHEY, ANDREW 4915 SOUTH CONGRESS AVENUE LAKE WORTH, FL 33461	<input type="checkbox"/> Delete			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LUCHEY, ANDREW 4915 SOUTH CONGRESS AVENUE LAKE WORTH, FL 33461	<input type="checkbox"/> Delete			
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: <i>Lynn Solomon President</i> <i>3/7/05</i> <i>561-964-5755</i>					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					

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