2008 FOR PROFIT CORPORATION

FILED ANNUAL REPORT Feb 25, 2008 08:00 Al DOCUMENT # L91107 **Secretary of State** L.B. HOLDINGS, INC. Principal Place of Business Mailing Address 7301-A W. PALMETRO PARK RD 7301-A W. PALMETRO PARK RD **SUITE #104E** SUITE #104E BOCA RATON, FL 33433 BOCA RATON, FL 33433 02202008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0207321 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent To real high the selection of LUNSTORD, EDWIN C DO NOT WRITE 3300 PGH BLVD SUITE 805 IN THIS SPACE PALM BEACH GARDENS, FL 33410 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) U000000838330 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE (8 \$150.00 03/05/08-80026-009 150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE LUNSFORD, JOSEPH L MALAF STREET ADDRESS 900 NW 6TH TERRACE CITY-ST-ZIP BOCA RATON, FL 33488 TSD TITLE LUNSFORD, EDWIN C III NAME 113 BOWSPRIT DRIVE STREET ADDRESS COY-SI-ZIP NORTH PALM BEACH, FL 33408 TITLE LUNSFORD, EDWIN C JR NAME STREET ADDRESS 161 N. CAUSEWAY STE 8 DO NOT WRITE CITY-ST-ZIP NEW SMYRNA BEACH, FL 32169 TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP

12. Thereby certify that the Information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and occurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the recent or trustee employered be execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attache

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

STREET ADDRESS CITY-ST-ZIP

2/21/08 380.427-6474