


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 28, 2008 8:00 am
Secretary of State

02-28-2008 90002 042 ***150.00

DOCUMENT # M25139 1. Entity Name LOUIS POULSEN LIGHTING INC.	
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Principal Place of Business 3260 MERIDIAN PARKWAY FT LAUDERDALE, FL 33331 US	Mailing Address 3260 MERIDIAN PARKWAY FT LAUDERDALE, FL 33331 US
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DO NOT WRITE IN THIS SPACE

40054200



02122008 No Chg-P CR2E034 (11/05)

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent PEDERSEN, KENT S 3260 MERIDIAN PKWY FT. LAUDERDALE, FL 33331	DO NOT WRITE IN THIS SPACE
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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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PTS PEDERSEN, KENT S 3260 MERIDIAN PKWY FT. LAUDERDALE, FL 33331
TITLE NAME STREET ADDRESS CITY - ST - ZIP	C THORSEN, PETER 3260 MERIDIAN PKWY FORT LAUDERDALE, FL 33331
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D LINDBERG, HANS 3260 MERIDIAN PKWY FORT LAUDERDALE, FL 33331
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing 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 accurate 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 receiver or trustee empowered to 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 attachment with an address, with all other like empowered.

SIGNATURE: Sandra Miranda 2/21/08 954-349-2525
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #