2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # M79935

1. Entity Name LAZAR, INC.

Principal Place of Business

Mailing Address

3780 W. HILLSBORO BLVD DEERFIELD BEACH, FL 33442 US 3780 W. HILLSBORO BLVD DEERFIELD BEACH, FL 33442

US

FILED Apr 26, 2007 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

04242007 No Chg-P

CR2E034 (11/05)

4. FEI Number Applied For 65-0050438 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CONDEFF, LOUIS J. 1900 OAKMONT TERRACE CORAL SPRINGS, FL 33071

DO NOT WRITE IN THIS SPACE

			the section of the processing	And the state of the state of
	e named entity submits this statement for the p tions of registered agent.	ourpose of changing its regist	ered office or registered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title	if applicable (NOTE: Regist	ered Agent signature required when reinstating)	DATE
FIL After M	E NOWIII FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Fin Trust Fund Contributio	nancing \$5.00 May Be	
10.	OFFICERS AND DIREC	TORS		
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12. Thereby 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:

NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OB PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

. Condaff

4/24/07

954.360-7789

Daytime Phone #