## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P0000003013

Entity Name: L&XINC.

FILED Apr 28, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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7380-A SW 40 STREET 7378 BIRD ROAD MIAMI, FL 33155 MIAMI, FL 33155

**Current Mailing Address: New Mailing Address:** 

7380-A SW 40 STREET 7378 BIRD ROAD MIAMI, FL 33155 MIAMI, FL 33155

FEI Number: 65-1032221 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PHANITDASACK, SONE PHANITDASACK, SONE 7380-A S.W. 40TH STREET 7378 BIRD ROAD CORAL GABLES, FL 33155 US CORAL GABLES, FL 33155 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: SONE PHANITDASACK 04/28/2004

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Address:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: () Change () Addition PHANITDASACK, XUAN Name: Name:

10801 SW 158 STREET Address: City-St-Zip: MIAMI, FL 33157 City-St-Zip:

Title: VPD Title: () Change () Addition () Delete PHANITDASACK, LEUNG Name: Name:

10801 SW 158 STREET Address: Address: MIAMI, FL 33157 City-St-Zip: City-St-Zip:

( ) Delete Title: Title: TSD TSD (X) Change ( ) Addition PHANITDASACK, JOY Name: PHANITDASACK, SINOUANE Name: 10801 SW 158 STREET 10801 SW 158 STREET Address: Address: City-St-Zip: MIAMI, FL 33157 City-St-Zip: MIAMI, FL 33157

Title: () Delete Title: (X) Change ( ) Addition PHANITDASACK, PHEI PHANITDASACK, VICTHICH Name: Name: Address: 11824 SW 123 AVENUE Address: 13272 SW 144 TERRACE

City-St-Zip: MIAMI, FL 33186 City-St-Zip: MIAMI, FL 33186

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: XUAN PHANITDASACK PD 04/28/2004