2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000101749

Entity Name: L.A.D.P.I., INC.

FILED Jul 19, 2003 Secretary of State

Entity Nar	me: L.A.D.P.I.	, INC.			
Current Principal Place of Business:			New Principal Place of Business:		
	LYWOOD BLV DOD, FL 3302			5683 SW 25 STREET HOLLYWOOD, FL 33021	
Current M	ailing Addres	s:	New Mailing Addr	New Mailing Address:	
P O BOX 2 PEMBROK	29284 KE PINES, FL	33029			
FEI Number:	: 65-1050760	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and Address	s of New Registered Agent:	
	E, LUIS A LYWOOD BLV OOD, FL 33023		5683 SW 25 STREE	DEL VALLE, LUIS A 5683 SW 25 STREET HOLLYWOOD, FL 33021	
	named entity s of Florida.	submits this statement for the p	ourpose of changing its registe	ered office or registered agent, or both,	
SIGNATURE:				07/19/2003	
	Electron	ic Signature of Registered Age	ent	Date	
	mpaign Financing	g Trust Fund Contribution(). TORS:	ADDITIONS/CHAN	IGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () DEL VALLE, LU 1242 NW 192 L PEMBROKE PII	ANE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: Citv-St-Zip:	DEL VALLE, EL 1242 NW 192 L		Title: Name: Address: City-St-Zip:	() Change () Addition	

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: LUIS A. DEL VALLE MR. 07/19/2003