2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000106458

Entity Name: L.T. ENTERPRISES OF GAINESVILLE, INC.

FILED May 01, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
7349 WES SUITE B	T NEWBERR	Y ROAD			
	LLE, FL 3260	54320			
Current Mailing Address:			New Mailing Address:		
7349 WEST NEWBERRY ROAD					
SUITE B GAINESVI	LLE, FL 3260	54320			
FEI Number	: 59-3682273	FEI Number Applied For ()	FEI Number Not App	licable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:		
SUITE B	TT TNEWBERR LLE, FL 3260!				
	named entity e of Florida.	submits this statement for the p	purpose of changing i	its registered office or registered agent, or both,	
SIGNATUR	RE:				
	Electror	nic Signature of Registered Ag	ent	Date	
		3(2)(b), F.S., the corporation did no	ot receive the prior notic	ce.	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	DPST (PHU, PHAT T 5128 N.W. 25T GAINESVILLE,		Title: Name: Address: City-St-Zip:	DPT (X) Change () Addition PHU, PHAT T 5128 N.W. 25TH. PLACE GAINESVILLE, FL 326066419	
Title: Name: Address: City-St-Zip:	VPD (PHU, SANG T 1802 NETTING JACKSONVILL		Title: Name: Address: City-St-Zip:	DVP (X) Change () Addition PHU, SANG T 1802 NETTINGTON COURT JACKSONVILLE, FL 322467699	
Title: Name: Address: City-St-Zip:	()) Delete	Title: Name: Address: City-St-Zip:	DVP () Change (X) Addition AU, HA T 5128 N.W. 25TH. PLACE GAINESVILLE, FL 326066419	
Title: Name: Address: City-St-Zip:	()) Delete	Title: Name: Address: City-St-Zip:	DS () Change (X) Addition PHU, TAM T 5128 N.W. 25TH. PLACE GAINESVILLE, FL 326066419	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: PHAT T. PHU DPT 05/01/2009