## **2005 FOR PROFIT CORPORATION**

## Jan 18, 2005 8:00 am Secretary of State ANNUAL REPORT 01-18-2005 90034 006 \*\*\*150.00 DOCUMENT # P01000001315 LARRY'S DELIGHTS, INC. Principal Place of Business Mailing Address 9737-VINEYARD COURT-9737 VINEYARD COURT -40001652 BOCA RATON, FL 33428-BOCA RATON: FL 33428 2. Principal Place of Business 8790 PLACID Mailing Address Suite Act. #. etc. Suite, Apt. #, etc. 01112005 Chq-P CR2E034 (10/03) Applied For 4. FEL Number 65-1070975 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent ROSENTHAL, LAWRENCE Street Address (P.O. Box Number is Not Acceptable) 9737-VINEYARD COURT BOCA RATON, FL. 33428... ACID 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 --(NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE Addition ROSENTHAL, LARRY NAME NAMI. STREET ADDRESS 9737-VINEYARD CT STREET ADDRESS BOCA RATON, FL. 33428 CITY-ST-ZIP CITY-ST-ZIP IIII F ☐ Delete DITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY 1ST-78P CITY-ST-7IP THE ☐ Addition Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP HILL ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CDY-ST-ZIP CITY - ST-ZIP mug Delete TITLE ☐ Change Addition NAME HAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP TITLE . . Delete TITLE Change Addition NAME MAME STREET ADDRESS STREET ADDRESS City - St - ZiP CITY - ST - ZIP

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Daytime Phone #

12. Thereby certify that the information supplied with this filing does not qualify 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 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