

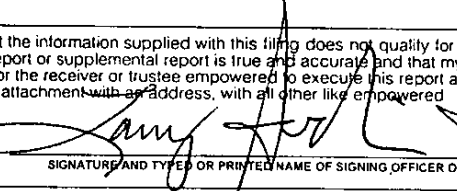


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2006 8:00 am
Secretary of State

04-14-2006 90135 048 ***150.00

DOCUMENT # P01000017030 1. Entity Name LFMB, INC.					
Principal Place of Business 1330 PALMETTO AVE WINTER PARK, FL 32789			Mailing Address 1330 PALMETTO AVE WINTER PARK, FL 32789		
2. Principal Place of Business 4776 New Broad St.		3. Mailing Address 4776 New Broad St.			
Suite, Apt. #, etc. # 250		Suite, Apt. #, etc. # 250			
City & State Orlando, Florida		City & State Orlando, Florida			
Zip 32814		Country USA		4. FEI Number 46-0472752	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent GODWIN, LARRY 1330 PALMETTO AVE WINTER PARK, FL 32789			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 4776 New Broad Street #250 Orlando, Florida City <div style="display: flex; justify-content: space-between;"> FL 32814 </div>		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GODWIN, LARRY 1330 PALMETTO AVENUE WINTER PARK, FL 32789 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4776 New Broad Street #250 Orlando, Florida 32814	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS MELOON, MELISSA 1330 PALMETTO AVENUE WINTER PARK, FL 32789 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4776 New Broad Street #250 Orlando, Florida 32814	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby 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: 			Date: 4-11-06		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					