

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000023669

Entity Name: LORD AND SONS, INC.

FILED
Jan 20, 2006
Secretary of State

Current Principal Place of Business:

169 EAST FLAGLER STREET
SUITE 1700
MIAMI, FL 33131

Current Mailing Address:

169 EAST FLAGLER STREET
SUITE 1700
MIAMI, FL 33131

New Principal Place of Business:

420 LINCOLN ROAD
SUITE 220
MIAMI BEACH, FL 33139

New Mailing Address:

420 LINCOLN ROAD
SUITE 220
MIAMI BEACH, FL 33139

FEI Number: 65-1121038

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUDSON, PHILLIP M III ESQ
201 S BISCAYNE BLVD
SUITE 400
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HOLTZ, ABEL
Address: 169 EAST FLAGLER STREET SUITE 1627
City-St-Zip: MIAMI, FL 33131

Title: D () Delete
Name: HOLTZ, FANA
Address: 9999 COLLINS AVE PH3B
City-St-Zip: BAL HARBOUR, FL 33154

Title: O () Delete
Name: HOLTZ, DANIEL
Address: 225 ARVIDA PKWY
City-St-Zip: CORAL GABLES, FL 33156

Title: O () Delete
Name: HOLTZ, JAVIER
Address: 94 LA GORCE CIR
City-St-Zip: MIAMI BEACH, FL 33141

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HOLTZ, ABEL
Address: 420 LINCOLN ROAD SUITE 220
City-St-Zip: MIAMI BEACH, FL 33139

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: O (X) Change () Addition
Name: HOLTZ, DANIEL
Address: 4040 NE 2ND AVE
City-St-Zip: MIAMI, FL 33137

Title: O (X) Change () Addition
Name: HOLTZ, JAVIER
Address: 28 INDIAN CREEK ISLAND ROAD
City-St-Zip: INDIAN CREEK VILLAGE, FL 33154

I hereby certify that the information supplied with this filing does not qualify for the 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: ABEL HOLTZ

D

01/20/2006

Electronic Signature of Signing Officer or Director

Date