

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000027946

FILED
Apr 28, 2005
Secretary of State

Entity Name: LAGUERRE & LAGUERRE INTERNATIONAL ENTERPRISES, INC.

Current Principal Place of Business:

2268 SOUTHEAST LONGHORN AVE
PORT ST LUCIE, FL 34952

New Principal Place of Business:

Current Mailing Address:

PO BOX 9396
PORT ST LUCIE, FL 34985

New Mailing Address:

FEI Number: 65-1088811

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAGUERRE, DEBRRAH
2268 SOUTHEAST LONGHORN AVE
PORT ST LUCIE, FL 34952 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: PD () Delete
Name: LAGUERRE, DEBRRAH M
Address: 2268 SOUTHEAST LONGHORN AVE
City-St-Zip: PORT ST LUCIE, FL 34952

Title: VP () Delete
Name: DOUGLAS, BEVERLEY
Address: 2268 SOUTHEAST LONGHORN AVE
City-St-Zip: PORT ST LUCIE, FL 34952

Title: S () Delete
Name: COX-SANDS, ANGELIA
Address: 2268 SOUTHEAST LONGHORN AVE
City-St-Zip: PORT ST LUCIE, FL 34952

Title: T () Delete
Name: LAGUERRE, PAUL
Address: 2268 SOUTHEAST LONGHORN AVE
City-St-Zip: PORT ST LUCIE, FL 34952

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: DEBRRAH LAGUERRE

PD

04/28/2005

Electronic Signature of Signing Officer or Director

Date