2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000027946

FILED Apr 28, 2006 Secretary of State

Entity Name: LAGUERRE & LAGUERRE INTERNATIONAL ENTERPRISES, INC.

Current Principal Place of Business: New Principal Place of Business:

2268 SOUTHEAST LONGHORN AVE 870 DUNKIRK AVE. N.W. PORT ST LUCIE, FL 34952 PALM BAY, FL 32907

Current Mailing Address: New Mailing Address:

PO BOX 9396 PO BOX 110914 PALM BAY, FL 32911

FEI Number: 65-1088811 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LAGUERRE, DEBRRAH
2268 SOUTHEAST LONGHORN AVE
PORT ST LUCIE, FL 34952 US
LAGUERRE, DEBRRAH
870 DUNKIRK AVE. N.W.
PALM BAY, FL 32911 US

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: 04/28/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition Title: () Delete Title: LAGUERRE, DEBRRAH M LAGUERRE, DEBRRAH M Name: Name: 2268 SOUTHEAST LONGHORN AVE 870 DUNKIRK AVE. N.W. Address: Address: City-St-Zip: PORT ST LUCIE, FL 34952 City-St-Zip: PALM BAY, FL 32907

Title: VP () Delete Title: VP (X) Change () Addition Name: DOUGLAS, BEVERLEY Name: DOUGLAS, BEVERLEY

Address: 2268 SOUTHEAST LONGHORN AVE Address: 870 DUNKIRK AVE. N.W.
City-St-Zip: PORT ST LUCIE, FL 34952 City-St-Zip: PALM BAY, FL 32907

Title: S () Delete Title: S (X) Change () Addition Name: COX-SANDS, ANGELIA Name: COX-SANDS, ANGELIA

Address: 2268 SOUTHEAST LONGHORN AVE Address: 870 DUNKIRK AVE. N.W.
City-St-Zip: PORT ST LUCIE, FL 34952 City-St-Zip: PALM BAY, FL 32907

Title: T () Delete Title: T (X) Change () Addition

 Name:
 LAGUERRE, PAUL
 Name:
 LAGUERRE, PAUL

 Address:
 2268 SOUTHEAST LONGHORN AVE
 Address:
 870 DUNKIRK AVE. N.W.

 City-St-Zip:
 PORT ST LUCIE, FL 34952
 City-St-Zip:
 PALM BAY, FL 32907

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: DEBRRAH LAGUERRE PRES 04/28/2006