

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**


FILED
Sep 04, 2003 8:00 am
Secretary of State

09-04-2003 90066 037 ***150.00

0206565 AV

DOCUMENT # **P01000080836**

1. Entity Name
LRI ENTERPRISES, INC.



Principal Place of Business
**7761 SPRINGTREE DRIVE
WEST PALM BEACH FL 33411**

Mailing Address
**PO BOX 226744
MIAMI FL 33122**

2. Principal Place of Business
7761 Spring Creek Drive


3. Mailing Address
Suite, Apt. #, etc.

City & State
West Palm Beach, Florida

City & State

Zip
33411

Country
USA



CHECK HERE IF MAKING CHANGES

4. FEI Number **65-1131613**

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**SMITH, LORNE
7761 SPRINGTREE DRIVE
WEST PALM BEACH FL 33411**

7. Name and Address of New Registered Agent

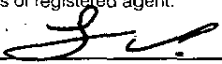
Name **Lorne Smith**

Street Address (P.O. Box Number is Not Acceptable)

7761 Spring Creek Drive

City **West Palm Beach** **FL** Zip Code **33411**

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  **Lorne Smith, President** **9/2/03**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD SMITH, LORNE 7761 SPRINGTREE DRIVE WEST PALM BEACH FL 33411	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD Lorne Smith 7761 Spring Creek Drive West Palm Beach, FL 33411	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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"/> Change <input type="checkbox"/> Addition
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"/> Change <input type="checkbox"/> Addition
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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **Signature Required Lorne Smith, President 9/2/03 561-640-4602**

Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (10/02)

Attachment
80143964
PO1000080836

LRI ENTERPRISES, INC
P.O. Box 226744
Miami, FL 33122

August 28, 2003

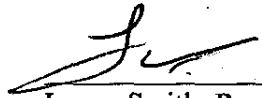
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

To Whom It May Concern:

Please accept the attached uniform business report with the \$150.00 fee. This is late because I did not receive the report initially because I was hospitalized and have been very ill. Also, the postman put the report in the wrong mail box which caused a delay.

I called the Division of Corporations and a representative said you would waive the \$400.00 late charge because I was ill and initially did not receive the report. I have just recovered from my illness and am sending the report to you now. Again, I am sorry this is late, but I have been very ill. Thank you very much.

Sincerely,



Lorne Smith, President