2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 09, 2005 8:00 am
Secretary of State
09-09-2005 90029 022 ***558.75

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1. Entity Name
LAURENT ENTERPRISES, INC.

Principal Place of Business	Mailing Address
2460 E COMMERCIAL BLVD FORT LAUDERDALE, FL 33308 US	2460 E COMMERCIAL BLVD FORT LAUDERDALE, FL 33308 US

DO NOT WRITE IN THIS SPACE

05152005 No Chg-P GR26034 (10/03)

4. FEI Number
65-1135598

Applied For
Not Applicable

5. Certificate of Status Desired X $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.
1640 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145

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

FILE NOW!!! FEE IS $550.00
Due by September 7, 2005

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

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	ALTVATTER, LAURENT
STREET ADDRESS	2460 E COMMERCIAL BLVD
CITY-ST-ZIP	FORT LAUDERDALE FL 33308
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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: LAURENT ALTVATTER 9/8/05 (954)772-7108
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #