FILED
Apr 29, 2004 08:00 AM
Secretary of State

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000101139

1. Entity Name
A LASTING LOOK, INC.

Principal Place of Business	Mailing Address
310 ESPLANADE 50 BOCA RATON, FL 33432	310 ESPLANADE 50 BOCA RATON, FL 33432

DO NOT WRITE IN THIS SPACE

04222004 No Chg-P CR2E034 (10/03)

4. FEI Number
65-1160718
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

MAZER, WENDY
RUSSELL MAZER
310 ESPLANADE UNIT #50
BOCA RATON, FL 33432

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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: Russell Mazer Russell Mazer April 24th 2004
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, 2004 Fee will be $550.00

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

000000138915
04/29/04-80100-004 150.00

10. OFFICERS AND DIRECTORS

TITLE	CFO
NAME	MAZER, RUSSELL
STREET ADDRESS	310 ESPLANDE UNIT #50
CITY-ST-ZIP	BOCA RATON, FL 33432
TITLE	CEO
NAME	MAZER, WENDY
STREET ADDRESS	310 ESPLANDE UNIT #50
CITY-ST-ZIP	BOCA RATON, FL 33432
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: Russell Mazer April 24 2004 561-447-0500
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR Date Daytime Phone #