

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000099155

FILED  
Jan 02, 2007  
Secretary of State

Entity Name: LAMAT SERVICES, "INCORPORATED"

## Current Principal Place of Business:

1506 EAST BEARSS AVENUE  
SUITE # 102-103  
LUTZ, FL 33549

## New Principal Place of Business:

1504 EAST BEARSS AVENUE  
SUITE # 102-103  
LUTZ, FL 33549

## Current Mailing Address:

1506 EAST BEARSS AVENUE  
SUITE # 102-103  
LUTZ, FL 33549

## New Mailing Address:

1763 LAKE EDGE CIRCLE  
CONLEY, GA 30288

FEI Number: 59-3543734

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

JOHNSON, ANNE MARIE  
2222 GLOVELAND COURT  
LUTZ, FL 33549 US

## Name and Address of New Registered Agent:

ABEL, LINA  
7748 PINE LANDS DRIVE  
WESLEY CHAPEL, FL 33544 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: LINA ABEL

01/02/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: ABEL, HERMAN W  
Address: 7303 MONTEREY BLVD.  
City-St-Zip: TAMPA, FL 33625

Title: M ( ) Delete  
Name: GORDON, T.J.  
Address: 3096 TIEMAN AVE.  
City-St-Zip: BRONX, NY 10469

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: ABEL, HERMAN W  
Address: 1763 LAKE EDGE CIRCLE  
City-St-Zip: CONLEY, GA 30288

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

Title: S ( ) Change (X) Addition  
Name: JOHNSON, ANNE MARIE  
Address: 2222 GLOVELAND COURT  
City-St-Zip: LUTZ, FL 33549

Title: VP ( ) Change (X) Addition  
Name: ABEL, DONALD S  
Address: 249 PETREE ROAD  
City-St-Zip: WINSTON SALEM, NC 27102

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: HERMAN ABEL

P

01/02/2007

Electronic Signature of Signing Officer or Director

Date