2007 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P02000100512

1. Entity Name

L & I REAL ESTATE HOLDINGS, INC.



Principal Place of Business

8660 W FLAGLER ST

200 MIAMI, FL 33144 Mailing Address

8660 W FLAGLER ST # 200

MIAMI, FL 33144

FILED Apr 19, 2007 8:00 am Secretary of State

04-19-2007 90205 022 ***150.00

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01152007

No Chg-P

CR2E034 (11/05)

 4. FEI Number
 Applied For

 11-3653703
 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LEITMAN, LORN 8660 W FLAGLER ST # 200 MIAMI, FL 33144

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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 little if applicable (NOTE Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.				\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS			
ΠŤLE	PD				
NAME	LEITMAN, LORN				
STREET ADDRÉSS	8660 W FLAGLER ST # 200				
CITY-ST-ZIP	MIAMI, FL 33144				•
TITLE	TD				
NAME	JOSEPH, IRV				
STREET ADDRESS	19451 NE 17TH AVE.				
CITY-ST-ZIP	MIAMI, FL 33179				
TITLE	VD				
NAME	WAX, IRWIN				
STREET ADDRESS	1624 PRESIDENTIAL WAY		1	DO	NOT MOITE
CITY-ST-ZIP	NORTH MIAMI BEACH, FL 33179			DU	NOT WRITE
TITLE	SD			INI '	THIS SPACE
NAME	SHUSTAK-WAX, LAURIE		l l	114	I FIIS SPACE
STREET ADDRESS	1624 PRESIDENTIAL WAY			-	
CITY-ST-ZIP	NORTH MIAMI BEACH, FL 33179				
TITLE					
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TIT! F					

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

NAME STREET ADDRESS CITY-ST-7IP

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

100100

4/16/07 305-727-57

Daytme Phone #