

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000118746

Entity Name: LASH COMMUNICATIONS INC.

FILED  
May 02, 2005  
Secretary of State

## Current Principal Place of Business:

1455 HOLLY HEIGHTS DR.  
SUITE 38  
FORT LAUDERDALE, FL 33304

## New Principal Place of Business:

3171 W BROWARD BLVD  
FORT LAUDERDALE, FL 33312

## Current Mailing Address:

1455 HOLLY HEIGHTS DR.  
SUITE 38  
FORT LAUDERDALE, FL 33304

## New Mailing Address:

1780 NW 43RD ST  
FORT LAUDERDALE, FL 33309

FEI Number: 76-0719264

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LASH, NICHOLAS  
1455 HOLLY HEIGHTS DR.  
SUITE 38  
FORT LAUDERDALE, FL 33304 US

## Name and Address of New Registered Agent:

LASH, NICHOLAS  
1780 NW 43RD ST  
FORT LAUDERDALE, FL 33309 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:

05/02/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: LASH, NICHOLAS  
Address: 1455 HOLLY HEIGHTS DR. SUITE 38  
City-St-Zip: FORT LAUDERDALE, FL 33304

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: LASH, NICHOLAS  
Address: 1780 NW 43RD ST  
City-St-Zip: FORT LAUDERDALE, FL 33309

I hereby certify that the information supplied with this filing does not qualify for the 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 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: NICHOLAS LASH

PD

05/02/2005

Electronic Signature of Signing Officer or Director

Date