

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Aug 29, 2003 8:00 am**  
**Secretary of State**

08-29-2003 90088 029 \*\*\*150.00

**DOCUMENT # P02000121867**

1. Entity Name  
**L & G INSTALLATIONS, INC.**



Principal Place of Business  
**PO BOX 840009  
HOLLYWOOD FL 33084**

Mailing Address  
**PO BOX 840009  
HOLLYWOOD FL 33084**

2. Principal Place of Business

**6591 SW 15 ST**

Suite, Apt. #, etc.

3. Mailing Address

**6591 SW 15 ST**

Suite, Apt. #, etc.

City & State

**West Miami, FL**

City & State

**Miami, FL**

Zip

**33144**

Country

Zip

**33144**

Country

4. FEI Number

**71-0915278**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**TRAGER, ROSS  
1000 NORTH HIATUS ROAD  
PEMBROKE PINES FL 33026**

7. Name and Address of New Registered Agent

Name

**LORENZO GARCIA**

Street Address (P.O. Box Number is Not Acceptable)

**6591 SW 15 ST**

City

**Miami**

FL

Zip Code

**33144**

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

**8/17/03**

**FILE NOW!!! FEE IS \$550.00**

**After September 10, 2003 Fee will be \$750.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete  
NAME **D/P/S**  
STREET ADDRESS **GARCIA, LORENZO**  
CITY-ST-ZIP **1000 NORTH HIATUS ROAD 6591 SW 15 ST  
PEMBROKE PINES FL 33026 Miami, FL 33144**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
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CITY-ST-ZIP

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 authorized 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 this filing.

**SIGNATURE:**

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**8/17/03**

CR2E034 (4/03)

Attachment

90153200  
#P02000121867

L & G INSTALLATIONS INC.  
6591 SW 15 ST  
WEST MIAMI, FL 33144

Monday, August 25, 2003

DEPARTMENT OF STATE  
DIVISION OF CORPORATION  
PO BOX 1500  
TALLAHASSEE, FL 32302

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RE: UNIFORM BUSINESS REPORT #P02000121867

We are in receipt of the second notice to pay the corporate uniform business report. We apologize; we never received any of the prior notices.

Please, we did not intentionally filed late because we never received any correspondence from your department by the post office. We recently received from the post office the second notice and we are acting promptly to correct this error. Please, We respectfully ask for an abatement of the penalty charges and accept our filing and the check for \$150.00. We have corrected the discrepancy with the post office and all reports will be filed on time from now on.

Thank you for your understanding and attention to our case.



LORENZO GARCIA - PRESIDENT