

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 19, 2004 8:00 am
Secretary of State

02-19-2004 90014 036 ***150.00

DOCUMENT # P03000007257

1. Entity Name
LAKES HOLDINGS, INC.



Principal Place of Business
6177 NW 154TH STREET
MIAMI LAKES, FL 33014

Mailing Address
6177 NW 154TH STREET
MIAMI LAKES, FL 33014

54008415



2. Principal Place of Business

6177 MIAMI LAKES DR. E
Suite, Apt. #, etc.

3. Mailing Address

6177 MIAMI LAKES DR. E
Suite, Apt. #, etc.

01082004

Chg-P

CR2E034 (10/03)

City & State

MIAMI LAKES, FL

City & State

MIAMI LAKES, FL.

4. FEI Number

85-0485348

Applied For
Not Applicable

Zip

33014

Country

Zip

33014

Country

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

RODRIGUEZ, JULIO A ESQ.
6177 NW 154TH STREET
MIAMI LAKES, FL 33014

7. Name and Address of New Registered Agent

Name
JULIO A RODRIGUEZ, ESQ. P.A.
Street Address (P.O. Box Number is Not Acceptable)
6177 MIAMI LAKES DR. E.

City **MIAMI LAKES, FL.** **FL** **Zip Code** **33014**

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]
Signature, typed or printed name of registered agent, if applicable.

JULIO A. RODRIGUEZ

(NOTE: Registered Agent signature required when reinstating)

2-17-04

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**

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **RODRIGUEZ, JULIO A**
STREET ADDRESS **6177 NW 154TH STREET** *Address CHANGE →*
CITY-ST-ZIP **MIAMI LAKES, FL 33014**

TITLE **D** ☐ Delete
NAME **LEDWIDGE, THOMAS**
STREET ADDRESS **15225 NW 77TH AVENUE, SUITE #205**
CITY-ST-ZIP **MIAMI LAKES, FL 33014**

TITLE ☐ Delete
NAME ☐ Delete
STREET ADDRESS ☐ Delete
CITY-ST-ZIP ☐ Delete

TITLE ☐ Delete
NAME ☐ Delete
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CITY-ST-ZIP ☐ Delete

TITLE ☐ Delete
NAME ☐ Delete
STREET ADDRESS ☐ Delete
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☒ Change ☐ Addition
NAME **RODRIGUEZ, JULIO A.**
STREET ADDRESS **6177 MIAMI LAKES DR. E**
CITY-ST-ZIP **MIAMI LAKES FL. 33014**

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

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

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CITY-ST-ZIP ☐ Change ☐ Addition

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

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:

[Signature] **JULIO A. RODRIGUEZ** **2/17/04**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #