2007 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P03000016385

1. Entity Name LORD & LASKER/FLORIDA, INC.



Principal Place of Business

555 W. GRANADA BLVD.

UNIT F-5 ORMOND BEACH, FL 32174 Mailing Address

555 W. GRANADA BLVD. Unit F-5

ORMOND BEACH, FL 32174

FILED Jan 29, 2007 08:00 AM Secretary of State



01232007

No Chg-P

CR2E034 (11/05)

4. FEI Number 16-1651551 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HARWELL, CHRISTOPHER C 555 W. GRANADA BLVD. UNIT F-5 ORMOND BEACH, FL 32174

DO NOT WRITE IN THIS SPACE

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, syped or printed name of registered agent and little if applicable. (NOTE: Registered.			d Agent argniture required when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	9. Election Campaign Finar Trust Fund Contribution.	scing \$5.00 May Be Added to Fees	
10,	OFFICERS AND DIREC	TORS		
TITLE	C			
NAME STREET ADDRESS	HARWELL, CHRISTOPHER C 555 W. GRANADA BLVD., UNIT F-5		Vikalijas Niloosa Roj	mbaan kinimatiin Erikiin ka kinimatiin ka
CITY-ST-ZIP	ORMOND BEACH, FL 32174			na na 1958 - Paris Na
TITLE				
NAME				000000610512 202702707-80024-024%158:75%
STREET ADDRESS CITY-ST-ZIP				02/02/01/0002 1/02 1/2/02/07
TITLE				
NAME				
STREET ADDRESS			l DO	NOT WRITE
CITY-ST-ZIP				trade trade to the state of the said of
TITLE NAME			I SOURCE IN	THIS SPACE
STREET ADDRESS				
CITY-ST-ZIP				
TITLE				
NAME. STREET ADDRESS	!			
CITY-ST-ZIP				 An analysis of the state of the
			 Production of Free Company of the Company of the Company 	รางพร้าง เพลง เพลง พร้องได้ เพราะ เมลาให้เกลงสำคัญสมารณ์ เพลง เมลง เมราะเลย

12. Thereby 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, withfall other like empowered.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP

THE AND TYPES OR PRINTED NAME OF BIGNING OFFICER OR DIRECT

Christopher C. Harwell

1/24/2007

386-615-8170

Daytime Phone #