

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000021642

Entity Name: LA WOODWORKS, CORP.

FILED
Jun 26, 2006
Secretary of State

Current Principal Place of Business:

4555 NE 6TH AVE
OAKLAND PARK, FL 33334

New Principal Place of Business:

Current Mailing Address:

4555 NE 6TH AVE
OAKLAND PARK, FL 33334

New Mailing Address:

FEI Number: 86-1086078

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCOLARICI, JOE
4555 NE 6TH AVE
OAKLAND PARK, FL 33334 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ADKINS, LEWIS R
Address: 321 MAIN ST
City-St-Zip: SABASTIAN, FL 32958 US

Title: VP () Delete
Name: ADKINS, PATRICIA S
Address: 321 MAIN ST
City-St-Zip: SABASTIAN, FL 32958 US

Title: D () Delete
Name: SCOLARICI, JOE
Address: 220 NW 46TH ST
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: BRODEN, MATTHEW A
Address: 586 NW 45TH WAY
City-St-Zip: DELRAY BEACH, FL 33445

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: JOE SCOLARICI

D

06/26/2006

Electronic Signature of Signing Officer or Director

Date