

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000026175

Entity Name: LASH COMPUTER ENTERPRISES, INC.

FILED
Apr 18, 2005
Secretary of State

Current Principal Place of Business:

6214 70TH AVE. CT. W
#305
UNIVERSITY PLACE, WA 98467

Current Mailing Address:

6214 70TH AVE. CT. W
#305
UNIVERSITY PLACE, WA 98467

New Principal Place of Business:

401 SW 86 AVE
108
PEMBROKE PINES, FL 33025

New Mailing Address:

401 SW 86 AVE
108
PEMBROKE PINES, FL 33025

FEI Number: 51-0450489

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: LASH, MARY
Address: 20212 NW 52ND PL., SUITE 735
City-St-Zip: MIAMI, FL 33055

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: LASH, MARY
Address: 401 SW 86 AVE, # 108
City-St-Zip: PEMBROKE PINES, FL 33025

Title: VP () Change (X) Addition
Name: RODRIGUEZ, GLADYS M
Address: 20214 NW 52 PL, # 736
City-St-Zip: OPA LOCKA, FL 33055

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: MARY LASH

PSTD

04/18/2005

Electronic Signature of Signing Officer or Director

Date