

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2008 08:00 A
Secretary of State

DOCUMENT # P03000055699

1. Entity Name
STORK'S LAS OLAS, INC.



Principal Place of Business
**1109 E LAS OLAS BLVD
FT LAUDERDALE, FL 33301**

Mailing Address
**1109 E LAS OLAS BLVD
FT LAUDERDALE, FL 33301**



02112008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
56-2364988

Applied For
Not Applicable

5. Certificate of Status Desired

☒ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**KENT, NORMAN E ESQ.
LAW OFFICES OF NORMAN ELLIOTT KENT, P.A.
800 E BROWARD BLVD, STE 310
FT LAUDERDALE, FL 33301**

**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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$180.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
STORK, JAMES
2148 NE 25TH ST.
WILTON MANORS, FL 33305**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
ANSIN, RON
2148 NE 25TH ST.
WILTON MANORS, FL 33305**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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04/01/08-80054-014 158.75

**DO NOT WRITE
IN THIS SPACE**

12. I hereby 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 applicable, with an attachment with an address, with all other like empowered.

SIGNATURE:

James Stork **JAMES STORK**

2/21/08 254-522 4670