


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 04, 2004 8:00 am
Secretary of State

08-04-2004 90023 001 ***150.00
 08-04-2004 90023 002 *****8.75

DOCUMENT # P03000071476
 1. Entity Name
LAWRENCE HOME IMPROVEMENT, INC.



Principal Place of Business: **7500 SW 79 COURT MIAMI, FL 33143**
 Mailing Address: **7500 SW 79 COURT MIAMI, FL 33143**

66431331



2. Principal Place of Business: **6840 North Cartee Rd**
 3. Mailing Address: **6840 North Cartee Rd**
 Suite, Apt. #, etc.:

07162004 Chg-P CR2E034 (10/03)

City & State: **Village of Palmetto Bay, FL**
 Zip: **33158** Country: **USA**

4. FEI Number: **83-0365567**
 Applied For: Not Applicable

5. Certificate of Status Desired: **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
STIEGLITZ, NICK W JR.
169 EAST FLAGLER STREET
1512
MIAMI, FL 33143

7. Name and Address of New Registered Agent
 Name:
 Street Address (P.O. Box Number is Not Acceptable):
 City: **FL** Zip Code:

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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

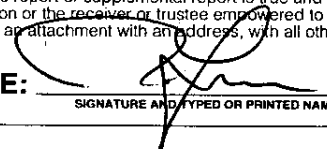
FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees
 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE: P	<input type="checkbox"/> Delete
NAME: LAWRENCE, JAMES B JR.	
STREET ADDRESS: 7500 SW 79 COURT	
CITY-ST-ZIP: MIAMI, FL 33143	
TITLE: S	<input type="checkbox"/> Delete
NAME: LAWRENCE, JAMES B JR.	
STREET ADDRESS: 7500 SW 79 COURT	
CITY-ST-ZIP: MIAMI, FL 33143	
TITLE:	<input type="checkbox"/> Delete
NAME:	
STREET ADDRESS:	
CITY-ST-ZIP:	
TITLE:	<input type="checkbox"/> Delete
NAME:	
STREET ADDRESS:	
CITY-ST-ZIP:	
TITLE:	<input type="checkbox"/> Delete
NAME:	
STREET ADDRESS:	
CITY-ST-ZIP:	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE: P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: Lawrence, James B. Jr.	
STREET ADDRESS: 6840 North Cartee Road	
CITY-ST-ZIP: Village of Palmetto Bay, FL 33158	
TITLE: S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: Lawrence James B Jr.	
STREET ADDRESS: 6840 North Cartee Road	
CITY-ST-ZIP: Village of Palmetto Bay, FL 33158	
TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:	
STREET ADDRESS:	
CITY-ST-ZIP:	
TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:	
STREET ADDRESS:	
CITY-ST-ZIP:	

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:  **James B Lawrence Jr.** **Aug. 1, 2004** **305-986-4534**
 Pres. Daytime Phone #