

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000075203

Entity Name: LAWSON & CO. IV, INC.

FILED  
Apr 25, 2012  
Secretary of State

**Current Principal Place of Business:**

5020 SOUTH STATE ROAD 7  
FORT LAUDERDALE, FL 33314

**New Principal Place of Business:**

**Current Mailing Address:**

5020 SOUTH STATE ROAD 7  
FORT LAUDERDALE, FL 33314

**New Mailing Address:**

FEI Number: 56-2378704

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LAWSON, WILLIAM  
5020 SOUTH STATE ROAD 7  
FORT LAUDERDALE, FL 33314 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: D  
Name: LAWSON, WILLIAM  
Address: 8640 NW 19 AVE  
City-St-Zip: PEMBROKE PINES, FL 33024

Title: VP  
Name: LAWSON, CYNTHIA  
Address: 6731 NW 22 CT  
City-St-Zip: MARGATE, FL 33063

Title: D  
Name: PEREZ, MIGUEL A  
Address: 5223 SW 128 PLACE  
City-St-Zip: MIAMI, FL 33175

Title: D  
Name: LAWSON, RICHARD  
Address: 3200 PORT ROYALE DR N #2108  
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: D  
Name: LAWSON, DANIEL  
Address: 8341 NW 23 STREET  
City-St-Zip: PEMBROKE PINES, FL 33024

I hereby 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 all other like empowered.

SIGNATURE: WILLIAM LAWSON

D

04/25/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date