2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000080504

Entity Name: LAWRENS CONSULTANTS & DESIGNS INC.

FILED Jul 26, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5031 SW 163 CT 10661 NORTH KENDALL DR MIAMI, FL 33185

STE 225

MIAMI, FL 33176

Current Mailing Address: New Mailing Address:

5031 SW 163 CT 10661 NORTH KENDALL DR

MIAMI, FL 33185 STE 225

MIAMI, FL 33176

FEI Number: 05-0582325 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

LAWRENCE, KAREN F MARIA, JOHNSTON N 560 EL DORADO PARK WAY 5031 SW 163 CT MIAMI, FL 33185 PLANTATION, FL 33317 US

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: MARIA N JOHNSTON 07/26/2005

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition LAWRENCE, KAREN F JOHNSTON, MARIA N Name: Name: 5031 SW 163 CT 560 EL DORADO PARK WAY Address: Address: City-St-Zip: MIAMI, FL 33185 City-St-Zip: PLANTATION, FL 33317

Title: () Delete Title: VΡ () Change (X) Addition

OGANDO, MANUEL Name: Name: Address: Address: 15564 SW 16TH ST MIAMI, FL 33194 City-St-Zip: City-St-Zip:

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: MARIA N JOHNSTON PD 07/26/2005