


2004 FOR PROFIT CORPORATION ANNUAL REPORT

04 NOV 23 AM 11:42
APPROVED
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT



09302004 Chg-P CR2E034 (10/03)

DOCUMENT # P03000087836					
1. Entity Name LAZM ENTERPRISES, INC.					
Principal Place of Business 7010 SW 71ST ST. MIAMI, FL 33143			Mailing Address 7010 SW 71ST ST. MIAMI, FL 33143		
2. Principal Place of Business 7330 NW 8 ST		3. Mailing Address 1521 Alton Rd. #			
Suite, Apt. #, etc.		# 431			
City & State Miami FL		City & State Miami Beach, FL			
Zip 33126		Country USA		Zip 33139	
				Country USA	
6. Name and Address of Current Registered Agent MIRABAL, LAZARO 7010 SW 71ST ST. 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 <u>Lazaro Mirabal</u> LAZARO MIRABAL 11/17/04 <small>Signature, typed or printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE					
FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MIRABAL, LAZARO 7010 SW 71ST ST. MIAMI, FL 33143	<input type="checkbox"/> Delete			
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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.			700042954507 11/23/04--01023--003 **150.00		
SIGNATURE: <u>Lazaro Mirabal</u> LAZARO MIRABAL 11/17/04 305 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			262-9986 <small>Date Usatime Phone #</small>		

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I have stated this

September

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