

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

2,005

FILED
Jul 11, 2005 8:00 am
Secretary of State

07-11-2005 90124 029 ***150.00

DOCUMENT #	P04000008699
1. Entity Name	
LMN CREATIVE SERVICES, INC	

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 419 B ESPANOLA WAY Suite, Apt. #, etc.		3. Mailing Address 419 B ESPANOLA WAY Suite, Apt. #, etc.	
City & State MIAMI BEACH, FL		City & State MIAMI BEACH, FL	
Zip 33139	Country	Zip 33139	Country

DO NOT WRITE IN THIS SPACE

14018573

4. FEI Number 14-1901445		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name STEVEN A. REHAGE	
Street Address (P.O. Box Number is Not Acceptable) 419 B ESPANOLA WAY	
City MIAMI BEACH	FL Zip Code 33139

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**

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STEVEN REHAGE 419 B ESPANOLA WAY MIAMI BEACH, FL 33139

11.

TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]

STEVEN REHAGE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/30/2005

Date

(305) 531-1937

Daytime Phone #

ATTACHMENT

14018573

LMN CREATIVE SERVICES, INC.

419 B ESPANOLA WAY
MIAMI BEACH, FL 33139
DOCUMENT # P04000008699

June 30, 2005

Division of Corporations
Uniform Business Report Office
P.O. Box 1500

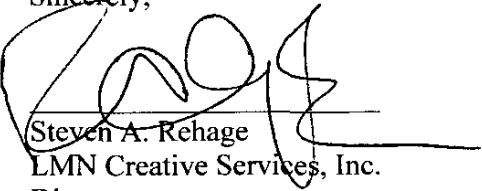
Dear Sir or Madam:

I just realize that I have not renewed my corporation for the year 2005. I have been out the country for so long that I lost track of everything (complications with my other business outside the US.)

I apologize for my tardiness in filing the 2005 UBR, but today I am sending you a check in the amount of \$150.00 plus a 2005 UBR form filled and signed to renew LMN CREATIVE SERVICES, INC.

Thanks for your immediate attention to this matter.

Sincerely,



Steven A. Rehage
LMN Creative Services, Inc.
Director

Enclosure