2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000025189

Entity Name: LAURALI COLLECTIONS, CORP.

FILED Feb 11, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

17125 N BAY RD SUITE 3601 P.O. BOX 530599 SUNNY ISLES, FL 33160 P.O. BOX 530599 MIAMI, FL 33153-059

Current Mailing Address: New Mailing Address:

 17125 N BAY RD SUITE 3601
 2121 PONCE DE LEON BLVD

 SUNNY ISLES, FL 33160
 SUITE 1100

 CORAL GABLES, FL 33134

FEI Number: 34-1976401 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:

ESPINOSA-EPPSTEIN, ERICK A 250 CATALONIA AVE SUITE 501 CORAL GABLES, FL 33134 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 ELRICK, LAURA V
 Name:
 ELRICK, LAURA V

 Address:
 17125 N BAY RD SUITE 3601
 Address:
 P.O. BOX 530599

 City-St-Zip:
 SUNNY ISLES, FL 33160
 City-St-Zip:
 MIAMI, FL 33153-059

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: LAURA ELRICK P 02/11/2005