## **2008 FOR PROFIT CORPORATION ANNUAL REPORT**

## **FILED** Apr 10, 2008 08:00 A Secretary of State DOCUMENT # P04000056827 1. Entity Name LAUDERDALE GROUP ENTERPRISES, INC. Principal Place of Business Mailing Address 215 SW 125TH AVENUE 215 SW 125TH AVENUE PLANTATION, FL 33325 PLANTATION, FL 33325 01252008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEL Number 75-3150590 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ABDALLAH, FRANCIS DO NOT WRITE **215 SW 125TH AVENUE** PLANTATION, FL 33325 IN THIS SPACE 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. INOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE KAHOOK, DAKHLALLAH NAME STREET ADDRESS 215 SW 125TH AVENUE CITY+ST-ZIP PLANTATION, FL 33325 TITLE NAME STREET ADDRESS of the first of the same CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. 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.

SIGNATURE: Waldlallak Kakooke RINTED NAME OF SIGNING OFFICER OR DIRECTOR

CITY-ST-ZIP