## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000080990

**Entity Name:** L.A.P. & F.M.L. CORPORATION

FILED Apr 22, 2005 Secretary of State

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

2191 SCOTT RD. 2191 SCOTT AVE.

WEST PALM BEACH, FL 33409 WEST PALM BEACH, FL 33409

Current Mailing Address: New Mailing Address:

2191 SCOTT RD. 2191 SCOTT AVE

WEST PALM BEACH, FL 33409 WEST PALM BEACH, FL 33409

FEI Number: 20-1157000 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:

LARA, FERNANDO M
2191 SCOTT RD.

LARA, FERNANDO M
2191 SCOTT AVE.

WEST PALM BEACH, FL 33409 US WEST PALM BEACH, FL 33409 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: 04/22/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 PINEDA, LUIS A
 Name:
 PINEDA, LUIS A

 Address:
 2191 SCOTT RD.
 Address:
 2191 SCOTT AVE.

City-St-Zip: WEST PALM BEACH, FL 33409 City-St-Zip: WEST PALM BEACH, FL 33409

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

 Name:
 LARA, FERNANDO M
 Name:
 LARA, FERNANDO M

 Address:
 2191 SCOTT RD.
 Address:
 2191 SCOTT AVE...

City-St-Zip: WEST PALM BEACH, FL 33409 City-St-Zip: WEST PALM BEACH, FL 33409

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: LUIS PINEDA PD 04/22/2005