2005 FOR PROFIT CORPORATION ANNUAL REPORT

08-26-2005 90001 018 ***150.00 P04000121634

Fill reas

DOCUMENT # P04000121634 1. Entity Name BETH ALLISON LASALA, INC.					05 Sm:	001 +0 PH	12: 28	
Principal Place of Business 7120 WOODLAND CREEK LANE LAKE WORTH, FL 33467 5654 WORTH, FL 33467 2. Principal Place of Business / 33463 3. Mailing Address			wy 324	3		₹ 50063 4 8	3	
Suite, Apt. #, etc. Suita, Apt. #, etc.				07162005	Chg-P	(10/03) CR2E034		
City & State	City & State	City & State		4. FEHNumbe	りゃくろんく	` 1 1	plied For	
Zip Country	Zip	Country		5. Certificate	of Status Desired	\$8.75 Add	litional	
6. Name and Address of Cu	rrent Registered Agent	Nice		7. Name and	Address of New	Registered Agent		
LASALA, BETH ALLISON THO MODELAND CREEK LANE LAKE MODELLE 12467 5654 Walthog Way			Name Street Address (P.O. Box Number is Not Acceptable)					
Lake World, # 33463				FL Zip Code				
 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								
FILE NOWIII FEE IS \$150.00 Oue by September 7, 2005 P. Election Campaig Trust Fund Contrib				.00 May Be ed to Fees	in accordance corporation did	with s. 607.193(2)(b), I not receive the prior i	F.S., the notice.	
1_	OFFICERS AND DIRECTORS			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11				
ITILE D NAME LASALA, BETH ALLISON 27-19 WOODDAMD-CREEKS CITY-SI-2P LAKE WORTH, FL-69-487	□ Delote 5797 = -	TITLE MANUE STREET ADOR CITY-ST-ZP	::33			☐ Change	☐ Addition	
TITLE MAME STREET ADDRESS CITY-ST-ZIP LAKE WOF-	TADORESS / 1/1 / 1/2 / 1/2 / 1/3 / 1					☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-61-2P	☐ Defeta	NAME STREET ADOR GITY-ST-ZP	235			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	□ Oelete	TITLE MAME STREET ADOR CITY-ST-ZIP	:55			☐ Change	Addition	
TITLE RAME STREET ADDRESS CITY-S1-2P	☐ Defete	TITLE NAME STREET ADOR CITY-S1-ZP	iss			☐ Change	Addition	
TITLE NAME \$IREET ADDRESS CITY-SI-JIP	☐ Delote	TITLE NAME STREET ADOR CITY-S1-ZIP	:25			Change	Addition	

I hereby certify that the information supplied with this tiling 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 eath; 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.

IGNATURE:

| Supplied AND TYPED OR PRINTED NAME OF SIGNAIS OFFICER OR DIRECTOR
| Object | O

SIGNATURE:

ATTACHMENT 50063483

July 12, 2005

State of Florida, Division of Corporations P. O Box 6198
Tallahassee, FL 32314-6198

RE: Beth Allison Lasala, Inc. 704000121634

Enclosed please find check for \$ 150.00 for the above corporation annual report fee, original renewal notice was not received thus the late filing.

We sincerely apologize for the inconvenience.

Sincerely,

Sincerely,

La Sala

Reth Lasala Pres

Please note the Corrected address which I believe that you have. My accountant also had new address so I don't know neason for old address on Corp annual report. Thanks, Batia Alah