

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 22, 2006 08:00 A
Secretary of State

DOCUMENT # P04000125446

1. Entity Name

LAMANTIA FAMILY DISTRIBUTORS INC.



Principal Place of Business

2100 SE 19 STREET
LAUDERDALE BY THE SEA, FL 33062

Mailing Address

2100 SE 19 STREET
LAUDERDALE BY THE SEA, FL 33062



02242006

No Chg-P

CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

76-0765644

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

LAMANTIA, DANIEL P
2100 SE 19 STREET
LAUDERDALE BY THE SEA, FL 33062

**DO NOT WRITE
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

Daniel P. Lamantia

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

3/1/06

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

**9. Election Campaign Financing
Trust Fund Contribution.**



**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE P
NAME LAMANTIA, DANIEL P
STREET ADDRESS 2100 SE 19 STREET
CITY - ST - ZIP LAUDERDALE BY THE SEA, FL 33062

TITLE VS
NAME LAMANTIA, NANCY C
STREET ADDRESS 2100 SE 19 STREET
CITY - ST - ZIP LAUDERDALE BY THE SEA, FL 33062

TITLE T
NAME LAMANTIA, NANCY A
STREET ADDRESS 2100 SE 19 STREET
CITY - ST - ZIP LAUDERDALE BY THE SEA, FL 33062

TITLE
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CITY - ST - ZIP

1100000476304
04/06/06-80030-003 150.00

**DO NOT WRITE
IN THIS SPACE**

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

Daniel P. Lamantia

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/1/06