## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED May 02, 2005 8:00 am Secretary of State

DOCUMENT # P04000144336  1. Entity Name LAGRANGE BUILDING & DESIGN, INC.						05-02-2005 90968 012 ***150.00					
Principal Place 22743 SW 54 BOCA RATON	I WAY	Mailing Address 22743 SW 54 WAY BOCA RATON, FL 33433 US									
2. Principal Place of Business		3. Mailing Address			<u> </u>						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			0425	52005	Chg-P	CR2E	034 (10/03)		
City & State		City & State			4. FE	Number	17903	576	<u> </u>	plied For t Applicable	
Zip	Country	Zip	Country	y 			Status Desired		\$8.75 Add Fee Required		
	6. Name and Address of Current	Registered Agent			7. Na	me and A	ddress of New	Registered	Agent		
	The state of the s			Name A O	1. 0	Ce	LODNE	•			
6209 WES	, LUIS A JR. T COMMERCIAL BOULEVAR	-	Street Addre	ress (P.O. Bo	x Number	is Not Accepta	hle) .	7 N			
SUITE 7 FORT LAUDERDALE, FL 333319					· · · · · ·						
* 1 				City Be	za V	Cado	<u> </u>	FL	Zip Cod	<u>454                                   </u>	
	named entity subjects this statement to ions of registered agent.	or the purpose of changing its	registered	d office or reg	gistered ager	nt, or both	, in the State of	Florida. 1 am	ramiliar with,	and accept	
SIGNATURE	Signature, typyd o printee harnetol registered arent	and title (applicable) (NOTE	Registered	Agent signature re	nier nerhy berupe	stating)		4125	2805		
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.	9. Election Campaig Trust Fund Contr		cing	\$5.00 Ma						
10.	OFFICERS AND	DIRECTORS	11.				HANGES TO C	FFICERS AN	D DIRECTORS	3 IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD LAGRANGE, ROBERT L 22743 SW 54TH WAY BOCA RATON, FL 33433	☐ Delete	TITLE NAME STREET CITY-S	T ADORESS	Treesor Boliv ZZZY Bora (	er Ar S.U Raton	Santiago Santiago Sur D FL:	) uy 3343;	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD PENA, LERONEL 22743 SW 54TH WAY BOCA RATON, FL 33433	Delete	TITLE NAME STREET CITY-S	T ADDRESS					☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET CITY-S	T ADDRESS					☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		t address St-zip		_			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete							☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		I .					☐ Change	Addition	
12. I hereby indicated	certify that the information supplied wit on this report or supplemental report	h this filing does not qualify for is true and accurate and that n	r the exem	nption stated ure shall have	I in Section 1 e the same le	19.07(3)(i gal effect	, Florida Statute as if made und	es. I further co ler oath; that I	ertify that the i	nformation or director	