

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000030598

Entity Name: LSL PRODUCTION & DISTRIBUTION, INC.

FILED  
Apr 08, 2008  
Secretary of State

**Current Principal Place of Business:**

906 SW ST LUCIE WEST BLVD PMB 154  
PORT ST LUCIE, FL 349861766

**New Principal Place of Business:**

**Current Mailing Address:**

906 SW ST LUCIE WEST BLVD PMB 154  
PORT ST LUCIE, FL 349861766

**New Mailing Address:**

FEI Number: 20-2457494      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MOGBO, CHUCK  
2800 W OAKLAND PARK BLVD SUITE 209  
OAKLAND PARK, FL 33311 US

**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: LOUHER, LENNOX S  
Address: 142 AILEEN STREET  
City-St-Zip: PORT ST LUCIE, FL 34983

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: LS LOUHER

P

04/08/2008

Electronic Signature of Signing Officer or Director

Date