2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000056952

Entity Name: L.B. MANAGEMENT, INC

FILED Jan 11, 2007 Secretary of State

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

7751 KINGSPOINTE PARKWAY SUITE 125, OFFICE 8 ORLANDO, FL 32819 US

Current Mailing Address: New Mailing Address:

7751 KINGSPOINTE PARKWAY SUITE 125, OFFICE 8 ORLANDO, FL 32819 US

FEI Number: 20-2725931 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:

LARSON, CAROLINE
5950 LAKEHURST DRIVE
SUITE 246
ORLANDO, FL 32819 US

LARSON, CAROLINE
8818 COMMODITY CIRCLE
SUITE 40
ORLANDO, FL 32819 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: 01/11/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD () Delete Title: TD (X) Change () Addition Name: PESTANA, JOSE AUGUSTO Name: PESTANA, JOSE AUGUSTO

Address: 13312 COLONY SQUARE DR APT 3121 Address: 3948 PROMENADE SQUARE DRIVE APT 5113

City-St-Zip: ORLANDO, FL 32837 US City-St-Zip: ORLANDO, FL 32837 US

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

 Name:
 BELLARDE, DANIELA
 Name:

 Address:
 9511 WATERFORD OAKS BLVD
 Address:

 City-St-Zip:
 WINTER HAVEN, FL 33884 US
 City-St-Zip:

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

 Name:
 BOSELLI, ROBERTO
 Name:
 BOSELLI, ROBERTO

 Address:
 3184 MONTICELLO PL APT 206
 Address:
 8302 TANGELO TREE DRIVE

 City-St-Zip:
 ORLANDO, FL 32835 US
 City-St-Zip:
 ORLANDO, FL 32836 US

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

Name: BOSELLI, MARCIA Name: BOSELLI, MARCIA

Address: 3184 MONTICELLO PL APT 206 Address: 8302 TANGELO TREE DRIVE
City-St-Zip: ORLANDO, FL 32835 US City-St-Zip: ORLANDO, FL 32836 US

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERTO BOSELLI SD 01/11/2007