

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 14, 2007 8:00 am
Secretary of State

02-14-2007 90064 007 ***150.00

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1. Entity Name

L AND N PRODUCTS, INC.

Principal Place of Business
7109 N.W. 74TH STREET
MIAMI FL 33166

Mailing Address
7109 N.W. 74TH STREET
MIAMI FL 33166

2. Principal Place of Business - No P.O. Box #
7171 N. W. 74 Street

3. Mailing Address
7171 N. W. 74 Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Miami, Florida

City & State
Miami, Florida

Zip
33166

Country

Zip
33166

Country

4. FEI Number 33-1122612

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DONNELLAN, J. JAMES III
9850 S.W. 96TH STREET
MIAMI FL 33176

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when so stating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE ☒ Delete
NAME HAXTON, LAIRD A
STREET ADDRESS 7500 S.W. 136 STREET
CITY ST ZIP MIAMI FL 33156

TITLE ☐ Delete
NAME LARRABEE, NORMAN
STREET ADDRESS 7500 S.W. 136 STREET
CITY ST ZIP MIAMI FL 33156

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY ST ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY ST ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY ST ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY ST ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME PD LARRABEE, NORMAN
STREET ADDRESS 8921 S.W. 76 STREET
CITY ST ZIP miami, FL 33166

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY ST ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY ST ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY ST ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/5/07

(305)887-1573