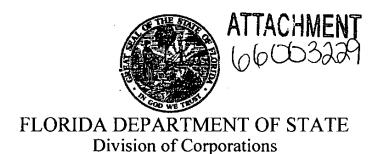
2006 FOR PROFIT CORPORATION ANNUAL REPORT - '

FILED Mar 01, 2006 8:00 am Secretary of State 01-27-2006 90043 022 ***150.00

DOCUMENT # P05000104632 1. Enity Name LS & M INC.							01-27-20	9004	3 022 **	*150.00	
Principal Plac	e of Busines		·	66003463							
7955 SW 16: Miami, FL 3:			7955 SW 162 ST MIAMI, FL 33157								
2. Principal Place of Business			3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.			01162006	Chg-P	CR2E0	34 (11/05)		
City & State			City & State			4. FEI Numb	212132	28		oplied For at Applicable	
Zip	Country		Zip Count		try	5. Certificate	of Status Desired-	•	\$8.75 Add Fee Require	itional- –	
	6. Name	and Address of Current	Registered Agent	Agent Name			7. Name and Address of New Registered Agent				
MANDEL, 7955 SW 1 MIAMI, FL	62 ST			Street Address (P.O. Box Number is Not Acceptable)							
					City	<u>.</u>		FL	Zip Code	<u> </u>	
8. The above	named entitions of regist	y submits this statement f	ed office or registe	red agent, or bo	th, in the State of Fi		familiar with.	and accept			
the obligations of registered agent.											
SIGNATURE.	Signature typed	or prived name of registered agen	d Agent signeure required	d when remaking)		DATE					
FIL After Ma	E NOW!!! by 1, 200	FEE IS \$150.00 6 Fee will be \$550	ncing \$5	.00 May Be led to Fees							
10.						ADDITIONS	CHANGES TO OFF	ICERS AND	DIRECTOR		
TITLE NAME	P MANDEL	LINDA	☐ Delete	E E				Change	Addition		
STREET ADDRESS CITY-ST-ZIP	7955 SW MIAMI, FI			ET ADDRESS .							
INLE	10.00 00.1, 1		☐ Detect	<u> </u>		<u> </u>		Changa	☐ Addition		
NAME STREET ADDRESS				E Et adoress							
CITY+S1+ZIP	·				-ST-21P					,	
TITLE NAME							Change	Addition			
STREET ADDRESS	NAM STR										
CITY-SI-ZIP			. Delets		-ST-ZIP	<u> </u>				-	
NAME			☐ Dets	HAM	E .				☐ Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP					£T ADDRESS .						
TITLE	l		☐ Deleta	1.11.1			·		Change	Addition	
NAME STREET ADDRESS				NAM Sire	E Et address						
CITY -ST-ZIP					-\$1-ДР						
TITLE NAME			Oden	TITLE	I				Change	Addition	
STREET ADDRESS	}			STRE	ET ADDRESS						
CITY-ST-ZP	Contilu char ch	a information as maliast sub-	h this filing does not qualify.		-SI-ZIP	Lia Charter 111	Elecate Contract	f. m. r · ·	is above		
12. Thereby certify that the information supplied with this filling does not qualify for the examptions contained in Chapter 119, Florida Statutes, I further certify that the information indicated on this report or supplemental report is true and securities and that was 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: 19-56 305-216-9565											



February 1, 2006

LS & M INC. 7955 SW 162 ST MIAMI, FL 33157

Subject: LS & M INC.

Reference Number:

P05000104632

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/cj ANNUAL REPORTS SECTION