## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000138694

Entity Name: PRALINES AT LAS OLAS, INC.

FILED Apr 05, 2007 Secretary of State

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

2921 NE 39TH CT 920 EAST LAS OLAS BLVD. LIGHTHOUSE POINT, FL 33064 FORT LAUDERDALE, FL 33301

Current Mailing Address: New Mailing Address:

2921 NE 39TH CT 920 EAST LAS OLAS BLVD. LIGHTHOUSE POINT, FL 33064 FORT LAUDERDALE, FL 33301

FEI Number: 20-3622617 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:

SINGER, BERNARD A
3107 STIRLING RD
STE 105
FT LAUDERDALE, FL 33312 US

KEAGLER, KIMBERLY L
920 EAST LAS OLAS BLVD.
FT LAUDERDALE, FL 33301 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: KIMBERLY L. KEAGLER 04/05/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

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

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

 Name:
 LEONARD, JEAN
 Name:
 LEONARD, JEAN

 Address:
 2921 NE 39TH CT
 Address:
 920 E. LAS OLAS BLVD.

 City-St-Zip:
 LIGHTHOUSE POINT, FL 33064
 City-St-Zip:
 FORT LAUDERDALE, FL 33301

Title: D ( ) Delete Title: D (X) Change ( ) Addition Name: KEAGLER, KIMBERLY Name: KEAGLER, KIMBERLY

Address: 2921 NE 39TH CT Address: 920 E. LAS OLAS BLVD.
City-St-Zip: LIGHTHOUSE POINT, FL 33064 City-St-Zip: FORT LAUDERDALE, FL 33301

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: KIMBERLY L. KEAGLER D 04/05/2007