## **2007 FOR PROFIT CORPORATION**

## **ANNUAL REPORT**

## DOCUMENT # P05000150077

SIGNATURE: By:

ignature and typed or printed want of storing office for director Theodore R. Stotzer, Secretary



FILED
May 01, 2007 8:00 am
Secretary of State
05-01-2007 90019 009 \*\*\*158.75

(954) 949-3480

Daytime Phone #

March 8, 2007

1. Entity Nam LAMB HC	e DLDINGS GP, INC.					03 0 <b>1 2</b> 007 .		13.	
Principal Place of Business 321 EAST HILLSBORO BOULEVARD DEERFIELD BEACH, FL 33441		Mailing Address 321 EAST HILLSBORO BOULEVARD DEERFIELD BEACH, FL 33441							
2. Principal P	tace of Business - No P.O. Box #	3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			02012007	Chg-P	CR2E034	(12/06)	
City & State		City & State			4. FEI Number 20-3768104			1 ····	plied For ot Applicable
Zip	Country Zip Cou		Country					8.75 Additional ee Required	
Name and Address of Current Registered Agent				, , , , , , , , , , , , , , , , , , ,	7. Name and A	ddress of New R	egistered Ag	ent	
				Name					
321 EAST	, THEODORE R HILLSBORO BOULEVARD D BEACH, FL 33441		Str	Street Address (P.O. Box Number is Not Acceptable)					
			Cit	ty			FL	Zip Cod	<del></del> :
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									
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.0	9. Election Campai Trust Fued Contr			00 May Be ed to Fees				
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS/CI	HANGES TO OFF	ICERS AND D	IRECTORS	S IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP STREET, <del>BRAIN -</del> 321 EAST HILLSBORO BLVD DEERFIELD BEACH, FL 33441	☐ Deleta	THTLE NAME STREET ADD CITY-ST-ZI	PRESS	n Street		X	<b>X</b> thange	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT STREET, LINDA 321 EAST HILLSBORO BLVD DEERFIELD BEACH, FL 33441	☐ Delete	TITLE NAME STREET ADD CITY-ST-ZI	I			С	_ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delate	TITLE NAME STREET ADD CITY - ST - ZI	RESS 321	dore R. Sto East Hillsb field Beach	oro Blvd.	<del></del>	] Change	XX Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADD CITY-ST-ZI	{			С	] Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADD CITY - ST - ZII	1				] Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADD CITY-ST-ZI	P				] Change	Addition
12. I hereby of indicated of the cor	certify that the information supplied with on this report or supplemental report is poration or the receiver or trustee empre	owered to execute this report :	as required b	ions contained shall have the s by Chapter 607,	in Chapter 119, F same legal effect a , Florida Statutes;	Florida Statutes. It is if made under of and that my name	further certify bath; that I am e appears in E	that the in an officer llock 10 or	or director Block 11 if