


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2007 8:00 am
Secretary of State

04-25-2007 90175 034 ***158.75

DOCUMENT # P06000034282 1. Entity Name LORD & MARTIN INC.			
Principal Place of Business 110 BONAVENTURE BLVD. 309 WESTON, FL 33326 US		Mailing Address 110 BONAVENTURE BLVD. 309 WESTON, FL 33326 US	
2. Principal Place of Business - No P.O. Box # 16080 South Post Rd. Suite, Apt. #, etc. 202		3. Mailing Address 16080 South Post Rd. Suite, Apt. #, etc. 202	
City & State Weston, FL		City & State Weston, FL	
Zip 33331 - US		Zip 33331 - US	
4. FEI Number 11-377-4771		Applied For <input checked="" type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ARAMBURO, JENIFFER V 110 BONAVENTURE BLVD. 309 WESTON, FL 33326		7. Name and Address of New Registered Agent Name Martin Ortiz Street Address (P.O. Box Number is Not Acceptable) 16080 South Post Rd. #202 City Weston FL Zip Code 33331	
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 J. J. President DATE 4/18/07 <small>Signature, type and print name of registered agent and title if applicable. (NOTE: If signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contributions <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE P NAME ARAMBURO, JENIFFER V STREET ADDRESS 110 BONAVENTURE BLVD. #309 CITY-ST-ZIP WESTON, FL 33326	<input checked="" type="checkbox"/> Delete	TITLE P NAME Ortiz Martin STREET ADDRESS 16080 South Post Rd. #202 CITY-ST-ZIP Weston, FL 33331	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE VP NAME ORTIZ, MARTIN STREET ADDRESS 110 BONAVENTURE BLVD. #309 CITY-ST-ZIP WESTON, FL 33326	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: J. J. President <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date 4/18/07 Daytime Phone # 954-835765	