2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000100377

Entity Name: L.E.P. SERVICES, INC.

FILED Apr 16, 2009 Secretary of State

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

11195 NW 5TH MANOR

CORAL SPRINGS, FL 33071 US

Current Mailing Address: New Mailing Address:

11195 NW 5TH MANOR

CORAL SPRINGS, FL 33071 US

FEI Number: 87-0779216 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

PECK, LISA E BAYNE, LISA E

11195 NW 5TH MANOR 11195 NW 5TH MANOR

CORAL SPRINGS, FL 33071 US CORAL SPRINGS, FL 33071 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: LISA E. BAYNE 04/16/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name: PECK, LISA E Name: BAYNE, LISA E 11195 NW 5TH MANOR 11195 NW 5TH MANOR Address: Address:

City-St-Zip: FORT LAUDERDALE, FL 33071 US City-St-Zip: CORAL SPRINGS, FL 33071 US

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

BAYNE, LISA E Name: PECK, LISA E Name:

11195 NW 5TH MANOR 11195 NW 5TH MANOR Address: Address: CORAL SPRINGS, FL 33071 US CORAL SPRINGS, FL 33071 US City-St-Zip: City-St-Zip:

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

PECK, LISA E BAYNE, LISA E Name: Name:

11195 NW 5TH MANOR 11195 NW 5TH MANOR Address: Address: City-St-Zip: CORAL SPRINGS, FL 33071 US City-St-Zip: CORAL SPRINGS, FL 33071 US

I hereby certify that the information supplied with this filing does not qualify 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: LISA E. BAYNE P, D 04/16/2009