## 2007 FOR PROFIT CORPORATION

# FILED Aug 13, 2007 8:00 am Secretary of State

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DOCUMENT # P0600010  1. Entity Name LAFFIN VENTURES CORPORATION			08-13-200	7 90022 009 ***5	550.00			
Principal Place of Business 1499 WEST PALMETTO PARK ROAD SUITE 412 BOCA RATON, FL 33486	Mailing Address 1499 WEST PALMETTI SUITE 412 BOCA RATON, FL 334			407	<b>.</b> 	87 NEW 38184 NEW 58118 61111 61	141 <b>0 8</b> 1 81 1 <b>0 9</b> 1	
2. Principal Place of Business - No P Q Box #	3. Mailing Address	3. Mailing Address						
Suite, Apt, #, etc.	Suite, Apt #, etc.			07052007	Chg-P	CR2E034 (12/06)		
City & State	City & State	City & State			406528	<b>├</b> ─- <b>├</b>	oplied For of Applicable	
Zip Country	Zip	Coun	try		e of Status Desired	\$8.75 Ad		
6. Name and Address of Curren	t Registered Agent		Name	7. Name and	d Address of New R	egistered Agent		
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525		Street Address (P.O. Box Number is Not Acceptable)						
			City			FL Zip Cod	ie	
The above named entity submits this statement the obligations of registered agent.	or the purpose of changing its	s registere	ed office or registere	ed agent, or bo	oth, in the State of Flo	orida. Lam familiar with,	and accept	
SIGNATURE	Y and title if applicable (NO)	F Berustere	d Agent signature required	when reinstations		DATE		
	9. Election Campa				<u> </u>	- DATE		
FILE NOW!!! FEE IS \$550.00 Due by September 14, 2007	Trust Fund Con			00 May Be ed to Fees				
10. OFFICERS AND		11.		ADDITIONS	/CHANGES TO OFFI	CERS AND DIRECTOR		
NAME CO JOSHUA GERSTINIE, STREET ADDRESS 1499 W. PALMETTO PY	IMARK TOMPKINS  WAME CO JUSHVA GERSTINIESO.  STREET ADDRESS 1499 W. PALMETTO PX Rd #412  STREE					☐ Change	☐ Addition {	
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12. I hereby certify that the information experies wit indicated on this report or supplemental report of the corporation or the recover or trustee emp changed, or on an attachment with an address.	is true and accurate and that r	ny signati	ure shall have the s	ame legal effec	at as if made under o	ath: that I am an officer	or director	
SIGNATURE: SIGNATURE AND TYPED OR	PRINTED NAME OF SIGNING OFFICER	OR DIRECT	OR .	*	8 · 8 · 0 7	212:400 Daytime Phone #	0.6900	

2007 FOR PROFIT CORPORATION
\_ANNUAL REPORT

1. Entity Nam	MENT # P06000109 ENTURES CORPORATIO		A STATE OF THE STA		ATTACHMENT				
1499 WEST PALMETTO PARK ROAD 1 SUITE 412 S		Mailing Address 1499 WEST PALMETT SUITE 412 BOCA RATON, FL 334		AD					
	lace of Business - No P O. Box #	3. Mailing Address			40129029				
Suite, Apt.		Suite, Apt. #, etc.			07052007 Chg-P CR2E034 (12/06)				
City & Stat	e 	City & State	City & State		4. FEI Number Applied For Not Applied For Not Applicat				
Zip	Country	Zip	Country		5. Certificate of Status Desired See Required Fee Required				
	6. Name and Address of Current	Registered Agent		Name	7. Name and Address of New Registered Agent				
CORPORA 1201 HAY:	ATION SERVICE COMPANY S STREET		-	Street Address (P.O. Box Number is Not Acceptable)					
TALLAHAS	SSEE, FL 32301-2525								
				City	FL Zip Code				
8. The above the obligat SIGNATURE_	named entity submits this statement from one of registered agent.  Signature, typed or printed name of registered agent.			office or register-	ered agent, or both, in the State of Florida. I am familiar with, and accepted agent, or both, in the State of Florida. I am familiar with, and accepted agent, or both, in the State of Florida. I am familiar with, and accepted agent, or both, in the State of Florida. I am familiar with, and accepted agent, or both, in the State of Florida. I am familiar with, and accepted agent, or both, in the State of Florida. I am familiar with, and accepted agent, or both, in the State of Florida. I am familiar with, and accepted agent, or both, in the State of Florida. I am familiar with, and accepted agent, or both, in the State of Florida.				
	LE NOW!!! FEE IS \$550.00 Le by September 14, 2007	9. Election Campa Trust Fund Con			6.00 May Be ded to Fees				
NAME STREE! ADDRESS	OFFICERS AND SOLE SHAVE OWNER MARK TOMPKINS C/O SUSHUA GEBSTIN, ES 1499 W. PALMETTO PK BOXA RATON, FL	□ Delete ②. 义a 世以12	11.  TITLE  NAME  STREET A  CITY-ST-	I	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11				
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12. Thereby 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 rules 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 indices error of the 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.									
SIGNAT	URE: SIGNATURE AND DEED OR	PRINTED NAME OF SIGNING OFFICER	R OR DIRECTOR		8 · 8 · 07 212 · 4 · 00 · 6 9 C				

ATTACHMENT 40129029

FROM 600010 9960

GERSTIN & ASSOCIATES

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Joseph Thillman, Esq.

Joseph@Gerstin.com

'also admitted in NY & NJ

\*\*also admitted in CA & HI

1499 WEST PALMETTO PARK RD., SUITE 412

Boca Raton, FL 33486 Telephone: (561) 750-3456

Facsimile: (561) 750-8185 Web address: www.Gerstin.com

July 06, 2007

#### Sent via regular mail

Mr. Adam Gottbetter, Esq. Gottbetter & Partners, LLP 488 Madison Ave. 12th Floor New York, NY 10022-5718

Re: Laffin Ventures Corporation

Dear Mr. Gottbetter:

Previously we forwarded to you the Annual Report form for the above-referenced corporation along with the instructions for filing. Upon receipt of the enclosed Notice of Intent to Dissolve, we searched the online records of the Florida Department of State and have determined the status of Laffin Ventures Corporation is still listed as delinquent in paying the Annual Report fee.

Regardless of whether you are continuing to operate your corporation, unless you have had the advice of an accountant, an attorney or similar professional, it is recommended that you continue to keep the corporation active by paying the Annual Report fee each year. Negative consequences related to liability can occur if a corporation is dissolved. Enclosed please find your Annual Report Form along with instructions.

As always, should you have any questions, please do not hesitate to contact me. Otherwise, upon completion of this form, please send a copy of your mailing to our office for our records.

Sincerely, Gerstin & Associates

Joshuz Gerstin, Esq.

### 2007 FOR PROFIT CORPORATION ANNUAL REPORT

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	6. Name	and Address of C	urrent Registe	red Agent		Name	/. Name an	d Address of New I	Registered	Agent	
CORPORA	ATION SE	RVICE COMPA	NY								
1201 HAY		T 32301-2525				Street Addres	ss (P.O. Box Numb	per is Not Acceptabl	e)		
771224114	JOEE, 1 E	02001 2020									
						City			FL	Zip Cod	e
	named entitions of regist		ment for the pur	rpose of changing its	s registeri	ed office or regi	stered agent, or bo	oth, in the State of Fl	orida. Lam	familiar with,	and accept
SIGNATURE		•									
	Signature, typed	or printed name of registers	ed agent and title if a	opticable (NO)	E Registere	ed Agent signature req	juired when reinstating)		DATE		
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		! FEE IS \$550. itember 14, 20	-	Trust Fund Con	•	· - '	\$5.00 May Be Added to Fees				
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12. I hereby r	certify that the	e information supplie	ed with this filin	g does not qualify for	or the eve	emplions contain	ned in Chanter 11	9. Florida Statutes 1	further cer	ify that the in	nformation
indicated of the cor changed,	on this report poration or the or on an atte	rt or supplemental on receiver or Irus ne receiver or Irus achment with an ach	empowered to	d accurate and that is execute this report ther like empowered	my signat as requi	ture shall have it red by Chapter	he same legal effe 607, Florida Statut	ct as if made under es; and that my nam	oath; that I also appears i	am an officer n Block 10 or	or director Block 11 if
SIGNAT	URE:							8.8.07	21	2.400.	<u>009</u>
				C					-		- 1

ATTACHMENT 40129029

# FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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#### **Detail by Entity Name**

#### Florida Profit Corporation

LAFFIN VENTURES CORPORATION

#### Filing Information

Document Number P06000109960

FEI Number

NONE

Date Filed

08/21/2006

State

FL

Status

ACTIVE

Effective Date

08/18/2006

#### **Principal Address**

1499 WEST PALMETTO PARK ROAD SUITE 412 BOCA RATON FL 33486

#### **Mailing Address**

1499 WEST PALMETTO PARK ROAD SUITE 412 BOCA RATON FL 33486

#### Registered Agent Name & Address

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525 US

#### Officer/Director Detail

Name & Address

NONE

#### **Annual Reports**

No Annual Reports Filed

#### **Document Images**

08/21/2006 -- Domestic Profit

Note: This is not official record. See documents if question or conflict.