

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000027884

FILED
Mar 20, 2008
Secretary of State

Entity Name: LAKOLED INC.

Current Principal Place of Business:

16699 COLLINS AVENUE
3508
SUNNY ISLES BEACH, FL 33160

New Principal Place of Business:

4045 SHERIDAN AVE
322
MIAMI BEACH, FL 33140

Current Mailing Address:

16699 COLLINS AVENUE
3508
SUNNY ISLES BEACH, FL 33160

New Mailing Address:

4045 SHERIDAN AVE
322
MIAMI BEACH, FL 33140

FEI Number: 11-3808151

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOLEDOV, ANDREY
16699 COLLINS AVENUE
3508
SUNNY ISLES BEACH, FL 33160 US

Name and Address of New Registered Agent:

KOLEDOV, ANDREY
4045 SHERIDAN AVE
322
MIAMI BEACH, FL 33140 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:

03/20/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: KOLEDOV, ANDREY
Address: 16699 COLLINS AVENUE, UNIT 3508
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: DVP () Delete
Name: KOLEDOVA, MARINA
Address: 16699 COLLINS AVENUE, UNIT 3508
City-St-Zip: SUNNY ISLES BEACH, FL 33160

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: KOLEDOV, ANDREY
Address: 4045 SHERIDAN AVENUE
City-St-Zip: MIAMI BEACH, FL 33140

Title: DVP (X) Change () Addition
Name: KOLEDOVA, MARINA
Address: 4045 SHERIDAN AVE, #322
City-St-Zip: MIAMI BEACH, FL 33140

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: ANDREY KOLEDOV

DP

03/20/2008

Electronic Signature of Signing Officer or Director

Date