

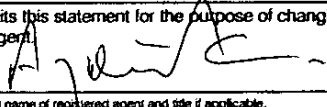
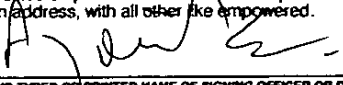


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

<b>DOCUMENT # P07000086095</b> 1. Entity Name <b>L. BEAR CORP.</b>				<b>FILED</b> <b>08 SEP 29 AM 10: 59</b> SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business <b>4836 E 8 LN          HIALEAH, FL 33013</b>		Mailing Address <b>POST OFFICE BOX 27-9184          MIRAMAR, FL 33027</b>			
2. Principal Place of Business - No P.O. Box # <b>6004 LAKE AVE</b>		3. Mailing Address <b>PO. BOX 660255</b>		09262008    Chg-P    CR2E034 (12/06)	
Suite, Apt. #, etc. <b>WEST PALM BEACHES</b>		Suite, Apt. #, etc. <b>MIAMI SPRINGS FL</b>		4. FEI Number <b>26-0787366</b>	
City & State <b>FL</b>		City & State <b>FL</b>		Applied For Not Applicable	
Zip <b>33405</b>		Country		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
Zip <b>33206</b>		Country		<b>6. Name and Address of Current Registered Agent</b>	
<b>DIAZ, FRANK RICARDO          4836 E 8 LN          HIALEAH, FL 33013</b>		<b>7. Name and Address of New Registered Agent</b>			
		Name <b>Address only</b>			
		Street Address (P.O. Box Number is Not Acceptable)			
		<b>6004 LAKE AVE.</b>			
		City <b>WEST PALM BEACHES FL</b> Zip Code <b>33405</b>			
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: 					
<small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>FILE NOW!!! FEE IS \$150.00          Due by September 12, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDRESSES CHANGED TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD <b>DIAZ, FRANK RICARDO</b> <b>4836 E 8 LN</b> <b>HIALEAH, FL 33013</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>6004 LAKE AVE.</b> <b>WEST PALM BEACHES FL</b> <b>33405</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>600136894056</b> <b>10/14/08--01007--007</b> <b>**150.00</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<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: 					
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR    Date    Daytime Phone #</small>					