

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000000129

FILED
Apr 21, 2009
Secretary of State

Entity Name: LRI DISASTER RECOVERY SERVICES, INC.

Current Principal Place of Business:

9653 SOUTHERN PINES COURT
DAVIE, FL 333286909 US

New Principal Place of Business:

5500 SW 82ND AVENUE
DAVIE, FL 333285204 US

Current Mailing Address:

9653 SOUTHERN PINES COURT
DAVIE, FL 333286909 US

New Mailing Address:

5500 SW 82ND AVENUE
DAVIE, FL 333285204 US

FEI Number: 26-4272848

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEINSTEIN, SCOTT
9653 SOUTHERN PINES COURT
DAVIE, FL 333286909 US

Name and Address of New Registered Agent:

WEINSTEIN, SCOTT
5500 SW 82ND AVENUE
DAVIE, FL 333285204 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:

04/21/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WEINSTEIN, SCOTT
Address: 9653 SOUTHERN PINES COURT
City-St-Zip: DAVIE, FL 333286009 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WEINSTEIN, SCOTT
Address: 5500 SW 82ND AVENUE
City-St-Zip: DAVIE, FL 333285204 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: SCOTT WEINSTEIN

P

04/21/2009

Electronic Signature of Signing Officer or Director

Date