2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED Apr 09, 2008 08:00 Al Secretary of State DOCUMENT # P93000015704 1. Entity Neme LORNIK ENTERPRISES, INC. Principal Place of Business Mailing Adoress 17339 S.E. 80TH TURNBULL CT. THE VILLAGES FL 32162 17339 S.E. 80TH TURNBULL CT. THE VILLAGES FL 32162 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apr. #, etc. 1st MOORE CR2E034 (10/07) City & State City & State 4. FE: Number Applied For 65-0400670 Not Applicable Zip Country Zφ Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent DELUCA, NICHOLAS Street Address (P.O. Box Number is Not Acceptable) 17339 SÉ 80TH TURNBULL CT. LADY LAKE FL 32162 City Zip Code 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 Squares typed or trained ison it of registred one it and the Hampicable NOTE: Registered Agent supporture required when reinmobilig DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2008 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Derete TITLE ☐ Change ☐ Addition NAME DELUCA, LORETTA I NAME STREET ADDRESS 17339 SE 80TH TURNBULL CT. STREET ADDRESS CITY-ST-ZIP THE VILLAGE FL 32162 CITY-ST-ZIP TITLE Delete THE ☐ Change ■ Addition ZIMMERMAN, ROXANNE NAME NAME 78 LINCOLN ROAD STREET ADDRESS STREET ADDRESS CITY-ST-7IP SNYDER NY CITY ST-7P BULL ☐ Darete MILE ☐ Change Addition Addition MAME DELUCA, WILLIAM A NAME STREET ADDRESS 1500 CLEVELAND DR STREET ADDRESS CITY-ST-ZIP CHEEKTOWAGA NY C/TY - ST-ZIP TOTAL De etc NTLE Change Addition DELUCA, NICHOLAS NAME NAME STREET APPRIESS 17339 SE 80TH TURNBULL CT. SIREET ADDRESS CITY-ST-ZIP THE VILLAGES FL 32162 CITY-ST-ZIP HILL De'ete ☐ Change Accition MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY: ST-ZIE TITLE ☐ Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIP CITY-ST-ZIP 12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

NICHOLAS DE LUCA

SIGNATURE: Trickolas de

CNATURE AND TYPED OF BRINTED HAME OF SIGNING OFFICER OF BURECT

4/4/08

352) 751-2978

Day: no Phone #