2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000086968

Entity Name: LAUDERDALE LIFESTYLE, INC.

FILED Apr 29, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3000 N. FEDERAL HWY #9 3000 N. FEDERAL HWY #2

FORT LAUDERDALE, FL 33306

FORT LAUDERDALE, FL 33306

Current Mailing Address: New Mailing Address:

3000 N. FEDERAL HWY #2 3000 N. FEDERAL HWY #9 FORT LAUDERDALE, FL 33306

FORT LAUDERDALE, FL 33306

FEI Number: 65-0445771 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FOLZ, PAMELA M FOLZ, PAMELA M

PLAZÁ 3000 N. FEDERAL HWY #9 PLAZA 3000 N. FEDERAL HWY #2 FORT LAUDERDALE, FL 33306

FORT LAUDERDALE, FL 33306 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: PAMELA M FOLZ 04/29/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

FOLZ, PAMELA M FOLZ, PAMELA M Name: Name:

PLAZA 3000 N. FEDERAL HIGHWAY, #9 Address: PLAZA 3000 N. FEDERAL HIGHWAY, #9 Address:

City-St-Zip: FT LAUDERDALE, FL 33306 City-St-Zip: FT LAUDERDALE, FL 33306

() Delete Title: (X) Change () Addition Title: Name:

FOLZ, PAMELA Name: FOLZ, PAMELA

PLAZA 3000 N. FEDERAL HIGHWAY, #9 Address: PLAZA 3000 N. FEDERAL HIGHWAY, #9 Address:

FT LAUDERDALE, FL 33306 FT LAUDERDALE, FL 33306 City-St-Zip: City-St-Zip:

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.

Ρ SIGNATURE: PAMELA M FOLZ 04/29/2009