

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000090096

Entity Name: LAKE SHOPPES, INC.

FILED
Jan 04, 2005
Secretary of State

Current Principal Place of Business:

1901 NE 188TH STREET
MIAMI, FL 33179 US

New Principal Place of Business:

1835 N.E. MIAMI GARDENS DRIVE
193
NORTH MIAMI BEACH, FL 33179 US

Current Mailing Address:

1835 NE MIAMI GARDENS DRIVE
SUITE 193
MIAMI, FL 33179 US

New Mailing Address:

FEI Number: 65-0551672 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEISTER, STEVEN
1835 NE MIAMI GARDENS DRIVE
SUITE 193
MIAMI, FL 33179 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MEISTER, STEVEN
Address: 1835 NE MIAMI GARDENS DRIVE #193
City-St-Zip: MIAMI, FL 33179

Title: ST () Delete
Name: STEVEN, MEISTER
Address: 1835 NE MIAMI GARDENS DRIVE
City-St-Zip: MIAMI, FL 33179

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: STEVEN MEISTER

PD

01/04/2005

Electronic Signature of Signing Officer or Director

Date