

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000090096

Entity Name: LAKE SHOPPES, INC.

FILED  
Feb 05, 2007  
Secretary of State

## Current Principal Place of Business:

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

## New Principal Place of Business:

## 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 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: STEVEN MEISTER

PD

02/05/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date