


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 10, 2008 08:00 AM
Secretary of State

DOCUMENT # P96000002379

1. Entity Name
LVS SALES, INC.



Principal Place of Business
**7281 NW 77 ST.
 MIAMI, FL 33166**

Mailing Address
**7281 NW 77 ST.
 MIAMI, FL 33166**

DO NOT WRITE IN THIS SPACE



07082008 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0634772

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**HOFFMAN, CARL H
 241 SEVILLA AVE., STE. 900
 CORAL GABLES, FL 33134**

DO NOT WRITE IN THIS SPACE

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 _____ DATE _____
Signature, word or printed name of registered agent and title (if applicable) (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
 Due by September 12, 2008**

9. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

| | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PT SLOCUM, LOUISE V. 7281 NW 77 ST. MIAMI, FL |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | V STORCH, LISA 7281 N.W. 77 STREET MIAMI, FL 33166 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | S STORCH, LISA 7281 N.W. 77 STREET MIAMI, FL 33166 |
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 07/10/08-80004-011 158.75

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

SIGNATURE: *Louise V. Slocum* **17-8-08** **305-889-3464**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #