2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 04, 2007 8:00 am Secretary of State

Daytime Phone #

DOCUMENT # P96000052416 1. Entity Name J & J LAMAR, INC.								05-04-2001	7 90094	030 ***	150.00
Principal Place of Business Mailing Address							401	ეუუუა			
2166 NW 30TH TER FT LAUDERDALE, FL 33311				2166 NW 30TH TER FT LAUDERDALE, FL 33311					** ** ********************************		#331##3 14 1##4
2. Principal Place of Business - No P.O. Box #				3. Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.			05012007	Chg-P	CR2E	34 (12/06)	
City & State				City & State			4. FEI Numbe 65-0684		•		Applied For Not Applicable
Zip	Country			Zip Coun		itry		of Status Desired		\$8.75 A	
	6. Name a	nd Address of Curren	t Regis	tered Agent		Name	7. Name and	Address of New R	egistered	Agent	
LAMAR, JOHNNY JR 2166 NW 30TH TER							(P.O. Box Numbe	r is Not Acceptable	e)		
FT LAUDERDALE, FL 33311						City				Zin Co	do
The above named entity submits this statement for the purpose of changing its register							red agent, or both	n, in the State of Flo	FL orida. I am	Zip Co familiar with	
the obligat	tions of register	ed agent.									
SIGNATURE.	Signature, typed or i	orinted name of registered ager	nt and title	il applicable (NO	TE. Registere	đ Agent signature require	d when reinstating)		DATE		
FIL After Ma	E NOW!!! F ay 1, 2007	EE IS \$150.00 Fee will be \$550	.00	9. Election Campa Trust Fund Con			.00 May Be led to Fees				
10.	10. OFFICERS AND DIRECTORS						ADDITIONS/	CHANGES TO OFF	ICERS AND	DIRECTO	RS IN 11
NAME SIREET ADDRESS CITY-SI-ZIP	D LAMAR, JO 2166 NW 30	TH TER		☐ Delete						Change	Addition
TITLE NAME	FT LAUDERDALE, FL 33311 D LAMAR, JIMMY			☐ Delete	TITL	[☐ Change	Addition
STREET ADDRESS CITY-ST-ZIP	The state of the s					EL ADDRESS -ST-ZIP					
TITLE · NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete				, ,		Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	1					☐ Change	Addition
TITLE NAME STREET ADDRESS CHY-ST-ZIP				☐ Delete						☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	4	1				☐ Change	Addition
of the cor	i on this report or rporation or the	nformation supplied wi or supplemental report receiver or trustee emp nment with an address	is true : powere	and accurate and that d to execute this repor	my signa t as requi	ture shall have the	same legal effect	as if made under d	nath that I :	am an office	e or director