

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 22, 2007 8:00 am
Secretary of State

02-22-2007 90017 043 ***150.00

DOCUMENT # P96000059492

1. Entity Name
LAMIA, INC.



Principal Place of Business
**473 SW 8TH ST.
MIAMI, FL 33130**

Mailing Address
**471 SW 8TH ST.
MIAMI, FL 33130**

40023006



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01082007

Chg-P

CR2E034 (12/06)

4. FEI Number

65-0689492

Apply Fee
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**FERNANDEZ, JOSE
471 SW 8TH STREET
MIAMI, FL 33130**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable (if not a registered agent, type name of agent and signature required when registering)

Date

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
**DPS
FERNANDEZ, JOSE
PO BOX 19-1511
MIAMI BEACH, FL 33119**

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

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CITY ST ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

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NAME
STREET ADDRESS
CITY ST ZIP

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 12 or Block 11, changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]

Typed or printed name of signing officer or director

2/16/07 305 859 8228