2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

Mar 16, 2006 08:00 AM **Secretary of State** DOCUMENT # P96000101574 1. Entity Name LAKE POINTE HOLDINGS, INC. Mailing Address Principal Place of Business 9095 S.W. 87 AVENUE 9095 S.W. 87 AVENUE SUITE 777 SUITE 777 MIAMI, FL 33176 MIAMI, FL 33176 01112006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0718076 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MITCHELL, JAMES R DO NOT WRITE 9095 S.W. 87 AVENUE SUITE 777 IN THIS SPACE MIAMI, FL 33176 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 (NOTE: Registered Agent signature required when reinstating) OATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 \$5.00 May Be Added to Fees Trust Fund Contribution. 10. OFFICERS AND DIRECTORS TITLE MAINE MITCHELL, JAMES R STREET ADDRESS 9095 S.W. 87 AVENUE, SUITE 777 CUTY-ST-ZIP MIAMI, FL 33176 U00000468842 03/25/06-80004-024 150.00 NAME STREET ADDRESS CITY-ST-ZIP TITLE HAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIF TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE MAME

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I turther 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 carr; 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 amplitachment with an address, with all other like empowered.

SIGNATURE: 2

STREET ADDRESS CITY-ST-ZIP

James R. Mitchell

03/13/06

305-270-0870

FILED