


2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 09, 2005 8:00 am
Secretary of State

02-09-2005 90049 045 ***150.00

DOCUMENT # P97000095743 1. Entity Name LAND RENOVATIONS INC.																		
Principal Place of Business 5251 S UNIVERSITY DR DAVIE FL 33328		Mailing Address 5251 S UNIVERSITY DR DAVIE FL 33328																
2. Principal Place of Business 4146 SW 64th Avenue <small>Suite, Apt. #, etc.</small>	3. Mailing Address 4146 SW 64th Avenue <small>Suite, Apt. #, etc.</small>																	
City & State Davie, Florida Zip 33314 Country Broward	City & State Davie, Florida Zip 33314 Country Broward																	
6. Name and Address of Current Registered Agent WEINSTEIN, SCOTT 5251 S UNIVERSITY DR DAVIE FL 33328		7. Name and Address of New Registered Agent Name Weinstein, Scott Street Address (P.O. Box Number is Not Acceptable) 4146 SW 64th Avenue City Davie FL Zip Code 33314																
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: <i>Scott Weinstein</i> (NOTE: Registered Agent signature required when reinstating) 2/1/05																		
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee Will Be \$550.00 Make Check Payable to Florida Department of State		9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. <input type="checkbox"/> Added to Fees																
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2" style="text-align: left;">10. OFFICERS AND DIRECTORS</th> <th colspan="2" style="text-align: left;">11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</th> </tr> </thead> <tbody> <tr> <td style="width: 50%; padding: 2px;"> TITLE PT <input type="checkbox"/> Delete NAME WEINSTEIN, SCOTT STREET ADDRESS 5251 S. UNIVERSITY DR. CITY-ST-ZIP DAVIE FL 33328 </td> <td style="width: 50%; padding: 2px;"> TITLE PT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition NAME Weinstein, Scott STREET ADDRESS 4146 SW 64th Avenue CITY-ST-ZIP Davie, Florida 33314 </td> </tr> <tr> <td style="padding: 2px;"> TITLE S <input type="checkbox"/> Delete NAME WEINSTEIN, MARIE STREET ADDRESS 5251 S. UNIVERSITY DR. CITY-ST-ZIP DAVIE FL 33328 </td> <td style="padding: 2px;"> TITLE S <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition NAME Weinstein, Marie STREET ADDRESS 4146 SW 64th Avenue CITY-ST-ZIP Davie, Florida 33314 </td> </tr> <tr> <td style="padding: 2px;"> TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP </td> <td style="padding: 2px;"> TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP </td> </tr> <tr> <td style="padding: 2px;"> TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP </td> <td style="padding: 2px;"> TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP </td> </tr> <tr> <td style="padding: 2px;"> TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP </td> <td style="padding: 2px;"> TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP </td> </tr> <tr> <td style="padding: 2px;"> TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP </td> <td style="padding: 2px;"> TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP </td> </tr> </tbody> </table>			10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		TITLE PT <input type="checkbox"/> Delete NAME WEINSTEIN, SCOTT STREET ADDRESS 5251 S. UNIVERSITY DR. CITY-ST-ZIP DAVIE FL 33328	TITLE PT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition NAME Weinstein, Scott STREET ADDRESS 4146 SW 64th Avenue CITY-ST-ZIP Davie, Florida 33314	TITLE S <input type="checkbox"/> Delete NAME WEINSTEIN, MARIE STREET ADDRESS 5251 S. UNIVERSITY DR. CITY-ST-ZIP DAVIE FL 33328	TITLE S <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition NAME Weinstein, Marie STREET ADDRESS 4146 SW 64th Avenue CITY-ST-ZIP Davie, Florida 33314	TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP	TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP	TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP	TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11																
TITLE PT <input type="checkbox"/> Delete NAME WEINSTEIN, SCOTT STREET ADDRESS 5251 S. UNIVERSITY DR. CITY-ST-ZIP DAVIE FL 33328	TITLE PT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition NAME Weinstein, Scott STREET ADDRESS 4146 SW 64th Avenue CITY-ST-ZIP Davie, Florida 33314																	
TITLE S <input type="checkbox"/> Delete NAME WEINSTEIN, MARIE STREET ADDRESS 5251 S. UNIVERSITY DR. CITY-ST-ZIP DAVIE FL 33328	TITLE S <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition NAME Weinstein, Marie STREET ADDRESS 4146 SW 64th Avenue CITY-ST-ZIP Davie, Florida 33314																	
TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP																	
TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP																	
TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP																	
TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP																	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <i>Scott Weinstein</i> 2/1/05																		