2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

03 SEP 18 PM 3:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000104002

1. Entity Name
LASSAK VENTURES, INC.

Principal Place of Business	Mailing Address
205 E. OSCEOLA ST STUART, FL 34994	205 E. OSCEOLA ST STUART, FL 34994

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
4179 SE OlD Saint Lucie Blvd	4179 SE old Saint Lucie Blvd
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Stuart Florida	City & State: Stuart Florida
Zip: 34996 Country: USA	Zip: 34996 Country: USA

4. FEI Number: **65-0803692** ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

MCCARTHY, TERENCE P
2081 EAST OCEAN BOULEVARD
STUART, FL 34996

7. Name and Address of New Registered Agent

Name: Andrew Lassak

Street Address (P.O. Box Number is Not Acceptable): 4179 SE old Saint Lucie Blvd

City: Stuart FL Zip Code: 34996

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] Andrew Lassak President — 9-15-03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Amended UBR is $61.25
Make Check Payable To Florida Department of State

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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST LASSAK, ANDREW 4179 SE OLD ST. LUCIE BLVD. STUART, FL 34996 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition 400023236614 09/22/03--01053--003 **150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (10/02)

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: [signature] 9/15/03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

gr 9/18

Andrew Lassak
4179 SE Old Saint Lucie blvd
Stuart Florida 34996

9-15-2003

Florida Dept. Of State

Uniform Business Report
Division Of Corporations
PO Box 1500
Tallahassee Florida 32302-1500

I did not receive the Annual report form. Please correct both address
For numbers
P01000090227
P97000104002

Sincerely,

Andrew lassak
772-708-8186