

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000096211

Entity Name: LAMCO PROPERTIES, INC.

FILED  
Apr 15, 2009  
Secretary of State

## Current Principal Place of Business:

8378 NW 66TH STREET  
MIAMI, FL 33166

## New Principal Place of Business:

## Current Mailing Address:

8378 NW 66TH STREET  
MIAMI, FL 33166

## New Mailing Address:

FEI Number: 65-0488375

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LOPEZ, ANTONIO R CPA  
782 NW LE JEUNE RD.  
SUITE 434  
MIAMI, FL 33126 US

## Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: LASTRE, HECTOR  
Address: 3801 ANDERSON RD  
City-St-Zip: CORAL GABLES, FL 33134

Title: VDF ( ) Delete  
Name: MENA, GUILLERMO  
Address: 8195 NW 69TH TERRACE  
City-St-Zip: MIAMI, FL 33143

Title: SD ( ) Delete  
Name: PLACERES, ANTONIO  
Address: 90 S HIBISCUS DR.  
City-St-Zip: MIAMI BEACH, FL 33139

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HECTOR LASTRE

V.P

04/15/2009

Electronic Signature of Signing Officer or Director

Date