

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000104731

FILED
Jun 17, 2004
Secretary of State

Entity Name: LM DEVELOPMENT GROUP, INC.

Current Principal Place of Business:

3325 S UNIVERSITY DRIVE
STE 201
DAVIE, FL 33328

New Principal Place of Business:

Current Mailing Address:

3325 S UNIVERSITY DRIVE
STE 201
DAVIE, FL 33328

New Mailing Address:

FEI Number: 65-0881794 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAVAGE, CRAIG PA
801 NE 167 ST
SUITE #302
NORTH MIAMI BEACH, FL 33162 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LOMBARDI, MICHAEL
Address: 3325 S UNIVERSITY DR STE 201
City-St-Zip: DAVIE, FL 33328

Title: D () Delete
Name: MATZ, BRIAN
Address: 3325 S UNIVERSITY DR
City-St-Zip: DAVIE, FL 33328

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: MATZ, BRIAN
Address: 3325 S UNIVERSITY DR SUITE 201
City-St-Zip: DAVIE, FL 33328

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MICHAEL LOMBARDI

PRES

06/17/2004

Electronic Signature of Signing Officer or Director

_____ Date