2008 FOR PROFIT CORPORATION

Apr 30, 2008 08:00 AN Secretary of State **ANNUAL REPORT DOCUMENT # P99000045686** 1. Entity Name LAMOTTA ENTERPRISES, INC. Principal Place of Business Mailing Address 715 N. HWY. 17-92 715 N. HWY. 17-92 LONGWOOD, FL 32750 LONGWOOD, FL 32750 04262008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3579945 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE LAMOTTA, JOHN D 715 N. HWY. 17-92 LONGWOOD, FL 32750 IN THIS SPACE 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution Added to Fees <u> HAAAAAA 75</u> 10. OFFICERS AND DIRECTORS 05/22/08-80086-005-150.00 PST TITLE LAMOTTA, JOHN D NAME 715 N, HWY. 17-92 STREET ADDRESS CITY-ST-ZIP LONGWOOD, FL 32750 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 typistee 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 wit

SIGNATURE:

TITLE

STREET ADORESS CITY-ST-7P TITLE

STREET ADDRESS CITY-ST-ZIP

FILED