2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000053727

Entity Name: LAKE WALES UNIVERSAL, INC.

FILED Apr 21, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
--------------------------------------	----------------------------------

19300 HWY. 27 SOUTH
LAKE WALES, FL 338532453

19300 HWY. 27 SOUTH
LAKE WALES, FL 33853

Current Mailing Address: New Mailing Address:

19300 HWY. 27 SOUTH
LAKE WALES, FL 338532453

19300 HWY. 27 SOUTH
LAKE WALES, FL 338532453

FEI Number: 59-3583063 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SYED, MUHAMMAD A 19300 US HWY 27 SOUTH LAKE WALES, FL 33853 US

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: KAPADIA, HASAN J Name: KAPADIA, HASAN J

 Address:
 19300 HWY 27 SOUTH
 Address:
 19300 HWY 27 SOUTH

 City-St-Zip:
 LAKE WALES, FL 338532453
 City-St-Zip:
 LAKE WALES, FL 33853

Title: STD () Delete Title: STD (X) Change () Addition
Name: SYFD MUHAMMAD A Name: SYFD MUHAMMAD A

 Name:
 SYED, MUHAMMAD A
 Name:
 SYED, MUHAMMAD A

 Address:
 19300 HWY. 27 SOUTH
 Address:
 19300 HWY. 27 SOUTH

 City-St-Zip:
 LAKE WALES, FL 338532453
 City-St-Zip:
 LAKE WALES, FL 33853

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: MUHAMMAD A. SYED STD 04/21/2009