

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 20, 2006 8:00 am
Secretary of State

02-20-2006 90048 035 ***150.00

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1. Entity Name

JEFFREY LAMB, INC.



Principal Place of Business

7133 BAY DRIVE, #801
MIAMI BEACH FL 33141

Mailing Address

7133 BAY DRIVE, #801
MIAMI BEACH FL 33141



2. Principal Place of Business

7133 BAY Drive
Suite 802

3. Mailing Address

7133 BAY Drive
Suite 802

1st MOORE

CR2E034 (10/05)

City & State

Miami Beach FL

City & State

Miami Bch FL

Zip

33141

Country

USA ~~FLORIDA~~

Zip

33141

Country

USA ~~FLORIDA~~

4. FEI Number

65-0939302

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LAMB, JEFFREY
7133 BAY DRIVE, #801
MIAMI BEACH FL 33141

7. Name and Address of New Registered Agent

Name JEFFREY LAMB

Street Address (P.O. Box Number is Not Acceptable)

7133 BAY DR

Suite 802

City

Miami Bch

FL

Zip Code

33141

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, typed or printed name of registered agent and file if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2006 Fee Will Be \$550.00

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

TITLE P
NAME LAMB, JEFFERY
STREET ADDRESS 7133 BAY DRIVE #801
CITY-ST-ZIP MIAMI BEACH FL 33141 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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CITY-ST-ZIP ☐ Delete

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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PRESIDENT
NAME JEFFREY LAMB
STREET ADDRESS 7133 BAY DR, Suite 802
CITY-ST-ZIP MIAMI Bch, FL 33141 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jeffrey Lamb, President 2/8/06 305 993 5579

Date

Daytime Phone #