## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 25, 2005 08:00 A Secretary of State

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1. Entity Name

L & L'REALTY INC.



Principal Place of Business

3540 FOREST HILL BLVD., SUITE 203 WEST PALM BEACH, FL 33406 Mailing Address

3540 FOREST HILL BLVD 203

WEST PALM BEACH, FL 33406



## DO NOT WRITE IN THIS SPACE

04192005 No Chg-P

CR2E034 (10/03)

FEI Number
 65-0954460

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

541433.4810

6. Name and Address of Current Registered Agent

DENTRY, DEBORAH A 3540 FOREST HILL BLVD #203 WEST PALM BEACH, FL 33406

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

			<del></del>	<del></del>						
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 Spranure, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) OATE										
	E NOW!!! FEE IS \$150.00 by 1, 2005 Fee will be \$550.00	9. Election Campaig Trust Fund Contril		\$5.00 May Be Added to Fees						
10.	OFFICERS AND DIREC	TORS	7 7							
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HEATON, LINN D 3540 FOREST HILL BLVD #203 WEST PALM BEACH, FL 33406				U00000329792 04/25/05-80134-004 150.00					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HEATON, LEC W 3540 FOREST HILL BLVD #203 WEST PALM BEACH, FL 33406									
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPST DERTRY, DEBORAH A 3540 FOREST HILL BLVD #203 WEST PALM BEACH, FL 33406			DO	NOT WRITE					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HEATON, GEORGE W 2655 N OCEAN DR #400 SINGLE ISLAND, FL 33407			in '	THIS SPACE					
TITLE NAME STREET AUDRESS CITY-ST-ZIP										
TITLE NAME STREET ADORESS CITY-ST-7IP										
12. Thereby certify that the information supplied with this filing does not qualify 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation of the receiver or trustee empowered to execute this 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.										