

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S95176

Entity Name: L.S.L. INVESTMENTS, INC.

FILED
Mar 04, 2009
Secretary of State

Current Principal Place of Business:

499 EAST SHERIDAN ST.
319
DANIA, FL 33004 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 85121
HALLANDALE, FL 33008 US

New Mailing Address:

FEI Number: 65-0294106

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ST LAURENT, LISE
499 EAST SHERIDAN STREET
STE. 319
DANIA, FL 33004 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ST LAURENT, LISE,
Address: P.O. BOX 85121
City-St-Zip: HALLANDALE, FL 330085121

Title: D () Delete
Name: ST. LAURENT, LISE
Address: PO BOX 85121
City-St-Zip: HALLANDALE, FL 33000

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: ST. LAURENT, LISE
Address: PO BOX 85121
City-St-Zip: HALLANDALE, FL 33008

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: LISE ST-LAURENT

D

03/04/2009

Electronic Signature of Signing Officer or Director

Date