


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 22, 2006 8:00 am
Secretary of State


04-12-2006 90105 008 ***150.00

DOCUMENT # V47510	
1. Entity Name LIFESTYLE PRODUCTS, INC.	

Principal Place of Business 3671 NW 52 ST MIAMI, FL 33142	Mailing Address 3640 NW 52ND ST MIAMI, FL 33142-244 US
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02062008 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0346075	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

8. Name and Address of Current Registered Agent

**MOLLERA, RAUL M.
3671 N.W. 52ND STREET
MIAMI, FL 33142**

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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: *Raul Mollera* 2-7-2006
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE DP	NAME MOLLERA, RAUL M.
STREET ADDRESS 3671 N.W. 52ND STREET	CITY-ST-ZIP MIAMI, FL 33142
TITLE DT	NAME MOLLERA, ARACELIA
STREET ADDRESS 3671 N.W. 52ND STREET	CITY-ST-ZIP MIAMI, FL 33142
TITLE	NAME
STREET ADDRESS	CITY-ST-ZIP
TITLE	NAME
STREET ADDRESS	CITY-ST-ZIP
TITLE	NAME
STREET ADDRESS	CITY-ST-ZIP

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IN THIS SPACE

12. I hereby certify that the information supplied with this filing 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 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: *Raul Mollera*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #