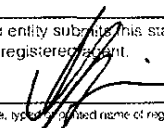
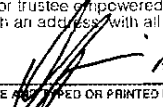


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2004 8:00 am
Secretary of State

01-20-2004 90063 018 ***150.00

DOCUMENT # V55673 1. Entity Name LSI HOLDINGS, INC.																																																																																																																																																											
Principal Place of Business 9350 SOUTH DIXIE HWY #1550 MIAMI, FL 33156 US				Mailing Address 9350 SOUTH DIXIE HWY #1550 MIAMI, FL 33156 US																																																																																																																																																							
2. Principal Place of Business C/O GARY D. LIPSON, AS RECEIVER Suite, Apt. #, etc. P.O. Box 566777 City & State MIAMI, FL Zip 33256 Country USA		3. Mailing Address C/O GARY D. LIPSON, AS RECEIVER Suite, Apt. #, etc. P.O. Box 566777 City & State MIAMI, FL Zip 33256 Country USA																																																																																																																																																									
4. FEI Number 62-1437188				Applied For ☐ Not Applicable																																																																																																																																																							
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required																																																																																																																																																							
6. Name and Address of Current Registered Agent LIPSON, GARY D. 9350 SOUTH DIXIE HWY #1550 MIAMI, FL 33156				7. Name and Address of New Registered Agent Name GARY D. LIPSON Street Address (P.O. Box Number is Not Acceptable) 914 MATANZAS AVE City CORAL GABLES FL Zip Code 33146																																																																																																																																																							
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  AS RECEIVER GARY D. LIPSON, AS RECEIVER 1/15/04 Signature, type or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering) DATE																																																																																																																																																											
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees																																																																																																																																																									
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: left; padding: 2px;">10. OFFICERS AND DIRECTORS</th> <th colspan="3" style="text-align: left; padding: 2px;">11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</th> </tr> <tr> <td style="width: 15%; padding: 2px;">TITLE</td> <td style="width: 55%; padding: 2px;"> R LIPSON, GARY D. 9350 SOUTH DIXIE HWY #1550 MIAMI, FL </td> <td style="width: 10%; padding: 2px; text-align: right;">☐ Delete</td> <td style="width: 15%; padding: 2px;">TITLE</td> <td style="width: 55%; padding: 2px;"> ☐ Change ☐ Addition 914 MATANZAS AVE. CORAL GABLES, FL 33146 </td> <td style="width: 10%; padding: 2px; text-align: right;">☐ Change ☐ Addition</td> </tr> <tr><td style="padding: 2px;">NAME</td><td></td><td></td><td style="padding: 2px;">NAME</td><td></td><td></td></tr> <tr><td style="padding: 2px;">STREET ADDRESS</td><td></td><td></td><td style="padding: 2px;">STREET ADDRESS</td><td></td><td></td></tr> <tr><td style="padding: 2px;">CITY-ST-ZIP</td><td></td><td></td><td style="padding: 2px;">CITY-ST-ZIP</td><td></td><td></td></tr> <tr><td style="padding: 2px;"> </td><td></td><td></td><td style="padding: 2px;"> </td><td></td><td></td></tr> <tr><td style="padding: 2px;">TITLE</td><td></td><td></td><td style="padding: 2px;">TITLE</td><td></td><td></td></tr> <tr><td style="padding: 2px;">NAME</td><td></td><td></td><td style="padding: 2px;">NAME</td><td></td><td></td></tr> <tr><td style="padding: 2px;">STREET ADDRESS</td><td></td><td></td><td style="padding: 2px;">STREET ADDRESS</td><td></td><td></td></tr> <tr><td style="padding: 2px;">CITY-ST-ZIP</td><td></td><td></td><td style="padding: 2px;">CITY-ST-ZIP</td><td></td><td></td></tr> <tr><td style="padding: 2px;"> </td><td></td><td></td><td style="padding: 2px;"> </td><td></td><td></td></tr> <tr><td style="padding: 2px;">TITLE</td><td></td><td></td><td style="padding: 2px;">TITLE</td><td></td><td></td></tr> <tr><td style="padding: 2px;">NAME</td><td></td><td></td><td style="padding: 2px;">NAME</td><td></td><td></td></tr> <tr><td style="padding: 2px;">STREET ADDRESS</td><td></td><td></td><td style="padding: 2px;">STREET ADDRESS</td><td></td><td></td></tr> <tr><td style="padding: 2px;">CITY-ST-ZIP</td><td></td><td></td><td style="padding: 2px;">CITY-ST-ZIP</td><td></td><td></td></tr> <tr><td style="padding: 2px;"> </td><td></td><td></td><td style="padding: 2px;"> </td><td></td><td></td></tr> <tr><td style="padding: 2px;">TITLE</td><td></td><td></td><td style="padding: 2px;">TITLE</td><td></td><td></td></tr> <tr><td style="padding: 2px;">NAME</td><td></td><td></td><td style="padding: 2px;">NAME</td><td></td><td></td></tr> <tr><td style="padding: 2px;">STREET ADDRESS</td><td></td><td></td><td style="padding: 2px;">STREET ADDRESS</td><td></td><td></td></tr> <tr><td style="padding: 2px;">CITY-ST-ZIP</td><td></td><td></td><td style="padding: 2px;">CITY-ST-ZIP</td><td></td><td></td></tr> <tr><td style="padding: 2px;"> </td><td></td><td></td><td style="padding: 2px;"> </td><td></td><td></td></tr> <tr><td style="padding: 2px;">TITLE</td><td></td><td></td><td style="padding: 2px;">TITLE</td><td></td><td></td></tr> <tr><td style="padding: 2px;">NAME</td><td></td><td></td><td style="padding: 2px;">NAME</td><td></td><td></td></tr> <tr><td style="padding: 2px;">STREET ADDRESS</td><td></td><td></td><td style="padding: 2px;">STREET ADDRESS</td><td></td><td></td></tr> <tr><td style="padding: 2px;">CITY-ST-ZIP</td><td></td><td></td><td style="padding: 2px;">CITY-ST-ZIP</td><td></td><td></td></tr> </table>						10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			TITLE	R LIPSON, GARY D. 9350 SOUTH DIXIE HWY #1550 MIAMI, FL	☐ Delete	TITLE	☐ Change ☐ Addition 914 MATANZAS AVE. CORAL GABLES, FL 33146	☐ Change ☐ Addition	NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-ST-ZIP			CITY-ST-ZIP									TITLE			TITLE			NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-ST-ZIP			CITY-ST-ZIP									TITLE			TITLE			NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-ST-ZIP			CITY-ST-ZIP									TITLE			TITLE			NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-ST-ZIP			CITY-ST-ZIP									TITLE			TITLE			NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-ST-ZIP			CITY-ST-ZIP		
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12. I hereby 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 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:  AS RECEIVER GARY D. LIPSON, AS RECEIVER 1/15/04 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #																																																																																																																																																											