

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F75507

Entity Name: LAWRENCE FACTOR, INC.

Current Principal Place of Business:

4740 NW 157 ST
MIAMI GARDENS, FL 33014

Current Mailing Address:

4740 NW 157 ST
MIAMI GARDENS, FL 33014 US

FEI Number: 59-2287373

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CUMMINGS, JUDALINE AS/T
4740 N W 157TH STREET
MIAMI GARDENS, FL 33014 US

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

Officer/Director Detail :

Title DP
Name KAPLAN, LAWRENCE
Address 900 BAY DR #1001
City-State-Zip: MIAMI BCH FL 33141

Title DV
Name KOSTICK, JOHN S
Address 131 NE 172 STR
City-State-Zip: NO MIAMI BCH FL 33162

Title V
Name LAUGHLIN, ROBERT M.
Address 18275 SW 29 ST
City-State-Zip: MIRAMAR FL 33029

Title S/T
Name CUMMINGS, JUDALINE A
Address 6890 MCCLELLAN ST
City-State-Zip: HOLLYWOOD FL 33024

I hereby 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 all other like empowered.

SIGNATURE: JUDALINE A CUMMINGS

AS/T

03/20/2013

Electronic Signature of Signing Officer/Director Detail

Date