2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE: ×

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Apr 14, 2004 08:00 AM Secretary of State DOCUMENT # P01000040321 1. Entity Name LAAKE FINANCIAL SERVICES, INC. Mailing Address Principal Place of Business 1070 KAPP DRIVE 1070 KAPP DRIVE CLEARWATER, FL 33765 CLEARWATER, FL 33765 04092004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1093347 Not Applicable \$8.75 Additional 5. Certilicate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GASSMAN, ALAN S ESQ. DO NOT WRITE 1245 COURT STREET SUITE 102 IN THIS SPACE CLEARWATER, FL 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 (in case), word or bringed name of registered agent and after applicable NOTE Peristored Agent signature required when reinstatings 9. Election Campaign Financing \$5.00 May Be U00000112061 FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 04/14/04-80007-018 150.00 OFFICERS AND DIRECTORS 10. HTLE NAME LAAKE, STUART H JR. STREET ADDRESS 1070 KAPP DRIVE CHY-ST-ZIP CLEARWATER, FL 33765 HHE STREET ADDRESS CHY ST ZIP HILE MAME STREET AUDHESS DO NOT WRITE CHY-ST ZIP IN THIS SPACE HILE NAME STREET ADDRESS CITY ST-ZIE TILLE NALÆ GIFEET AUDRESS CITY-SEZIP HHE NAME STREET ADDRESS CITY-ST-ZIP 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 relating signature shall have the same legal effect as if made under eath, that I am an officer or director of the corporation or the receiver of trustee empowered to execute this diport 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, both all other tips supplied.

OFFICER OR DIRECTOR

FILED