

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91797 041 ***150.00

**2003 FOR PROFIT CORPORATION
 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # F01000004103

1. Entity Name
LUMINUS TECHNOLOGIES, CORP.



Principal Place of Business
 1110 BRICKELL AVENUE, STE 800
 MIAMI, FL 33131

Mailing Address
 1110 BRICKELL AVENUE, STE 800
 MIAMI, FL 33131

2. Principal Place of Business
1402 Brickell Bay Dr.

3. Mailing Address
1402 Brickell Bay Dr.

Suite, Apt. #, etc.
1103

Suite, Apt. #, etc.
1103

City & State
Miami, FL

City & State
Miami, FL

Zip
33131 Country
U.S.

Zip
33131 Country
U.S.



CHECK HERE IF MAKING CHANGES

4. FEI Number
65-1127674

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
NUNEZ, DIEGO
 1110 BRICKELL AVENUE, STE 800
 MIAMI, FL 33131

7. Name and Address of New Registered Agent
 Name **Nuncz, Diego**
 Street Address (P.O. Box Number is Not Acceptable)
1402 Brickell Bay Dr. # 1103
 City **Miami** FL Zip Code **33131**

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 **Nunezawano**

DATE **APR 28-03**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
 After May 1, 2003 Fee will be \$550.00
 Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PC	Delete
NAME	NUNEZ, DIEGO	<input type="checkbox"/>
STREET ADDRESS	1110 BRICKELL AVENUE, STE 800	
CITY-ST-ZIP	MIAMI, FL 33131	
NAME		<input type="checkbox"/>
STREET ADDRESS		
CITY-ST-ZIP		
NAME		<input type="checkbox"/>
STREET ADDRESS		
CITY-ST-ZIP		
NAME		<input type="checkbox"/>
STREET ADDRESS		
CITY-ST-ZIP		
NAME		<input type="checkbox"/>
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PC	Change	Addition
NAME	Nuncz, Diego	<input checked="" type="checkbox"/>	<input type="checkbox"/>
STREET ADDRESS	1402 Brickell Bay Dr. # 1103		
CITY-ST-ZIP	Miami, FL 33131		
NAME		<input type="checkbox"/>	<input type="checkbox"/>
STREET ADDRESS			
CITY-ST-ZIP			
NAME		<input type="checkbox"/>	<input type="checkbox"/>
STREET ADDRESS			
CITY-ST-ZIP			
NAME		<input type="checkbox"/>	<input type="checkbox"/>
STREET ADDRESS			
CITY-ST-ZIP			
NAME		<input type="checkbox"/>	<input type="checkbox"/>
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 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: **Nunezawano**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE **APR 28-03**

Daytime Phone #

Daytime Phone #

CRZE034 (10/02)