

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000080934

Entity Name: LEZCANO SERVICES INC

FILED
Feb 06, 2009
Secretary of State

Current Principal Place of Business:

17083 SW 149 PLACE
MIAMI, FL 33187

New Principal Place of Business:

Current Mailing Address:

17083 SW 149 PLACE
MIAMI, FL 33187

New Mailing Address:

FEI Number: 20-2963061

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GUERRA, LIETTYS
17083 SW 149 PLACE
MIAMI, FL 33187 US

Name and Address of New Registered Agent:

LEZCANO, MICHEL
17083 SW 149 PLACE
MIAMI, FL 33187 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: MICHEL LEZCANO

02/06/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: GUERRA, LIETTYS
Address: 17083 SW 149 PLACE
City-St-Zip: MIAMI, FL 33187

Title: DS (X) Delete
Name: LEZCANO, MICHEL
Address: 17083 SW 149 PLACE
City-St-Zip: MIAMI, FL 33187

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: LEZCANO, MICHEL
Address: 17083 SW 149 PLACE
City-St-Zip: MIAMI, FL 33187

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: MICHEL LEZCANO

PRES

02/06/2009

Electronic Signature of Signing Officer or Director

Date