

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000085330

FILED
Apr 15, 2009
Secretary of State

Entity Name: L & C INTERNATIONAL GROUP, INC.

Current Principal Place of Business:

1040 KELLY CREEK CIR
OVIEDO, FL 32765

New Principal Place of Business:

Current Mailing Address:

1040 KELLY CREEK CIR
OVIEDO, FL 32765

New Mailing Address:

FEI Number: 26-3372006

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GBS CONSULTANTS, INC.
18501 PINES BLVD
SUITE 201
PEMBROKE PINES, FL 33029 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: CHIRINOS, JOSE
Address: 1040 KELLY CREEK CIR
City-St-Zip: OVIEDO, FL 32765

Title: VPTD () Delete
Name: LUNA, YSABEL
Address: 1040 KELLY CREEK CIR
City-St-Zip: OVIEDO, FL 32765

Title: D () Delete
Name: GONZALEZ, MARCELA P
Address: 1040 KELLY CREEK CIR
City-St-Zip: OVIEDO, FL 32765

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: LUNA ISABEL

VPTD

04/15/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date