2007 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P94000027729

1. Entity Name LUIS & COMPANY, INC.



FILED Mar 22, 2007 08:00 All Secretary of State

Principal Place of Business

Mailing Address

30 NE 1 ST

SUITE 3 MIAMI, FL 33132 US 30 NE 1 ST SUITE 3

MIAMI, FL 33132 US



02202007

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0694528

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SHIENBAUM, GOLDIE 8877 COLLINS AVE MIAMI BEACH, FL 33154

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	named entity submits this statement for the pions of registered agent.	ourpose of changing its registere	l ed office or re	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and a	эссері
SIGNATURE	Signature, typed or printed name of registered agent and title	if applicable. (NOTE: Registered	d Agent signature	required when retristating)	DATE	_
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		Election Campaign Finan Trust Fund Contribution.	icing	\$5.00 May Be Added to Fees	000000675633 03/30/07-80026-023 150.00	
10. πιε	OFFICERS AND DIREC	CTORS				-
NAME STREET ADDRESS CITY-ST-ZIP	SHIENBAUM, GOLDIE 8877 COLLINS AVE 902 MIAMI BEACH, FL					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SHIENBAUM, LUIS 8877 COLLINS AVE 902 MIAM! BEACH, FL		DO NOT WRITE			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP						

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/20/07

Davtime Phone #