2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 353830

FILED Feb 05, 2009 Secretary of State

Entity Name: LUNE	0 & PULLARA INC			
Current Principal Place of Business:		New Principal Place of Business:		
533 NORTHLAKE BL NORTH PALM BEAC				
Current Mailing Address:		New Mailing Address:		
533 NORTHLAKE BL NORTH PALM BEAC				
FEI Number: 59-1290443	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:				
LINDA N. JAYNE 424 ALPINE ROAD WEST PALM BEACH	H, FL 33405 US			
The above named en in the State of Florida		purpose of changing its registered	office or registered agent, or both,	
SIGNATURE:				
Electronic Signature of Registered Agent		ent	Date	
Election Campaign Fina	ncing Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
	() Delete JILL, VEN AVENUE JND, FL 33455	Title: PS (Name: O'BRIEN, JIL Address: 8356 SE WR City-St-Zip: HOBE SOUNI	EN AVENUE	

Title: VΡ () Delete

Name: LYNN, LISA Address: 4116 ILEX CR S

PALM BEACH GARDENS, FL 33410 City-St-Zip:

Title: () Delete Name: ROGERS, JOHN

Address: 1104 HARMONY WAY City-St-Zip: ROYAL PALM BEACH, FL 33411 Title: () Change () Addition

() Change () Addition

Name: Address:

City-St-Zip:

Title:

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: LISA LYNN VΡ 02/05/2009