


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 12, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # F93253</b> 1. Entity Name LUNA GROUP CORPORATION	
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Principal Place of Business 150 NW 156 STREET <del>P.O. BOX 611345</del> MIAMI, FL 33169 US	Mailing Address P.O. BOX 611345 P.O. BOX 611345 MIAMI, FL 33161 US
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02132007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2609164	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent  DEVERAS, JESSE L 150 N.W. 156 ST. MIAMI, FL 33169	<b>DO NOT WRITE IN THIS SPACE</b>
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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 \_\_\_\_\_  
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, 2007 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DEVERAS, JESSE L 150 N.W. 156 ST. MIAMI, FL 00000, 33169
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ANTE, AURORA R 150 NW 156TH ST MIAMI, FL 33169
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U00000702599  
04/20/07-80104-010 150.00

**DO NOT WRITE  
IN THIS SPACE**

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:  JESSE L. DEVERAS APR 12/07 (315) 947-9810  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #