


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 10, 2005 8:00 am
Secretary of State

01-10-2005 90049 032 ***150.00

DOCUMENT # L50539 1. Entity Name LUMI TRADE INC.	
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Principal Place of Business 10773 NW 58 ST UNIT 383 MIAMI, FL 33178	Mailing Address 10773 N. W. 58 ST UNIT 383 MIAMI, FL 33178
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20001169



01062005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 52-1667617	Applied For Not Applicable
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5. Certificate of Status Desired: ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent APARICIO, LUIS 10773 NW 58 ST UNIT 383 MIAMI, FL 33178
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**DO NOT WRITE
IN THIS SPACE**

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 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	PTSD APARICIO, LUIS 10773 NW 58 ST #383 MIAMI, FL-33175
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *Luis Aparicio*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #