

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 08, 2004 8:00 am**  
**Secretary of State**

04-08-2004 90041 027 \*\*\*150.00

**DOCUMENT # P00000054277**

1. Entity Name

**LUIFER ENTERPRISES, INC.**



Principal Place of Business

**19187 NW 82 CIRCLE COURT  
MIAMI FL 33015**

Mailing Address

**19187 NW 82 CIRCLE COURT  
MIAMI FL 33015**

**04040344**



**MOORE CR2E034 (11/03)**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-1017451**

Applied For  
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DUERO, LUIS A  
12916 NW 10TH STREET  
MIAMI FL 33182**

Name **Jorge Alzate**  
Street Address (P.O. Box Number is Not Acceptable)  
**19187 NW 82 Circle Court**

City **Miami**

**FL**

Zip Code  
**33015**

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

**02-25-04**

**FILE NOW! FEE IS \$150.00**

**After May 1, 2004 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME **PS**  
STREET ADDRESS **DUERO, LUIS A**  
CITY-ST-ZIP **12916 NW 10TH STREET  
MIAMI FL 33182** ☐ Delete

TITLE  
NAME **P**  
STREET ADDRESS **Jorge Alzate**  
CITY-ST-ZIP **19187 NW 82 Circle Ct  
Miami FL 33015** ☐ Change ☒ Addition

TITLE  
NAME **VT**  
STREET ADDRESS **LONDONO, LUIS F**  
CITY-ST-ZIP **19187 NW 82 CIRCLE COURT  
MIAMI FL 33015** ☐ Delete

TITLE  
NAME **DS**  
STREET ADDRESS **Duero, Luis A**  
CITY-ST-ZIP **12916 NW 10th street  
Miami FL 33182** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
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CITY-ST-ZIP ☐ Delete

TITLE  
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CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
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CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**02-25-04**

**786 262 1003**

Date

Daytime Phone #