## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000056405

Entity Name: LUNO TECHNOLOGIES, INC.

FILED Jan 07, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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6945 WEST 2ND COURT HIALEAH, FL 33014

Current Mailing Address: New Mailing Address:

6945 WEST 2ND COURT HIALEAH, FL 33014

FEI Number: 65-1018644 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:

BLANCO, ANTHONY

1946 CYGNUS CT.

WESTON, FL 33327 US

BLANCO, ANTHONY

45 EAST 53RD. TERRACE

HIALEAH,, FL 33013 US

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.

SIGNATURE: ANTHONY BLANCO 01/07/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: BLANCO, ANTHONY Name: BLANCO, ANTHONY Address: 45 EAST 53RD. TERRACE

 Address:
 1946 CYGNUS COURT
 Address:
 45 EAST 53RD. TERRACE

 City-St-Zip:
 WESTON, FL 33327
 City-St-Zip:
 HIALEAH., FL 33013

Title: TD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 LEAL, AIDA
 Name:

 Address:
 45 EAST 53RD. TERRACE
 Address:

 City-St-Zip:
 HIALEAH, FL 33013
 City-St-Zip:

Title: SD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BLANCO, AGUSTIN
 Name:

 Address:
 6945 WEST 2ND COURT
 Address:

 City-St-Zip:
 HIALEAH, FL 33014
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: AGUSTIN BLANCO SD 01/07/2005