


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 07, 2005 08:00 AM
Secretary of State

DOCUMENT # P00000083644 1. Entity Name SANTA LUCIA COMMERCIAL DEVELOPMENT CORP.	
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Principal Place of Business 780 N.W. 42ND AVE. #416 MIAMI, FL 33126	Mailing Address 780 N.W. 42ND AVE. #416 MIAMI, FL 33126
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DO NOT WRITE IN THIS SPACE



01062005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-1037277	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent ROUSSO, MARK E 2875 NE 191 STREET PH 3A AVENTURA, FL 33180	DO NOT WRITE IN THIS SPACE
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

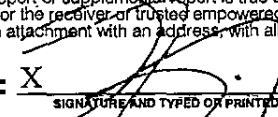
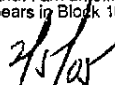
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PTD SPERANZA, ENRIQUE C 3610 YACHT CLUB DR #1105 AVENTURA, FL 33180
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VSD RUIZ, CLELIA 780 N.W. 42ND AVE. #416 MIAMI, FL 33126
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D RUIZ, SANTIAGO 3610 YACHT CLUB DR #1105 AVENTURA, FL 33180
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D RUIZ, IGNACIO 3610 YACHT CLUB DR #1105 AVENTURA, FL 33180
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D RUIZ, MARTIN E 3610 YACHT CLUB DR #1105 AVENTURA, FL 33180
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D RUIZ, MARIA G 780 N.W. 42ND AVE. #416 MIAMI, FL 33126

**DO NOT WRITE
IN THIS SPACE**

UD00000218893
02/08/05-80005-008 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: X  **ENRIQUE C. SPERANZA, PRES.** 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #