

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 08, 2008 8:00 am
Secretary of State

04-08-2008 90017 015 ***150.00

DOCUMENT # P01000050105

1. Entity Name

LUMERCA, INC.



Principal Place of Business

185 SE 14 TERRACE
913
MIAMI FL 33131

Mailing Address

C/O ROBERT PERKINS 401 MIRACLE MILE
408
CORAL GABLES FL 33134



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E034 (10/07)

4. FEI Number 65-1120854

Applied For

Not Applicable

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

FRAGA, CLAUDIA

8541 S.W. 85 STREET 13700 S.W. 73 Ave.
MIAMI FL 33143

33158

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 fee, if applicable.

(NOTE: Registered Agent Signature required when "Certificate of Status Desired" is checked.)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2008 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 P ☐ Delete
NAME RAMIREZ PATINO, ANGEL MARIA
STREET ADDRESS 7730 CAMINO REAL F-114
CITY-ST-ZIP CORAL GABLES FL 33134

TITLE ☒ Change ☐ Addition
NAME ☒ Change ☐ Addition
STREET ADDRESS 13700 S.W. 73 Avenue
CITY-ST-ZIP Miami, FL 33158

TITLE D ☐ Delete
NAME RAMIREZ PATINO, INES CATALINA
STREET ADDRESS 7730 CAMINO REAL F-114
CITY-ST-ZIP MIAMI FL 33143

TITLE ☒ Change ☐ Addition
NAME ☒ Change ☐ Addition
STREET ADDRESS 13700 SW 73 Avenue
CITY-ST-ZIP Miami, FL 33158

TITLE D ☐ Delete
NAME PATINO POSSE, MERCEDES
STREET ADDRESS 7730 CAMINO REAL F-114
CITY-ST-ZIP MIAMI FL 33143

TITLE ☒ Change ☐ Addition
NAME ☒ Change ☐ Addition
STREET ADDRESS 13700 SW 73 Avenue
CITY-ST-ZIP Miami, FL 33158

TITLE V ☐ Delete
NAME FRAGA, CLAUDIA
STREET ADDRESS 8541 S.W. 85 STREET
CITY-ST-ZIP MIAMI FL 33143

TITLE ☒ Change ☐ Addition
NAME ☒ Change ☐ Addition
STREET ADDRESS 13700 SW 73 Avenue
CITY-ST-ZIP Miami, FL 33158

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/21/08

Date

Daytime Phone #