

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000080612

FILED
Apr 24, 2009
Secretary of State

Entity Name: LUMEN COMMERCIAL GROUP, INC.

Current Principal Place of Business:

C/O ASTRID FLAHERTY
8015 N.W. 29 ST
MIAMI, FL 33122

New Principal Place of Business:

Current Mailing Address:

C/O A. FLAHERTY
8015 NW 29TH STREET.
MIAMI, FL 33122

New Mailing Address:

C/O ASTRID FLAHERTY
8015 N.W. 29 ST
MIAMI, FL 33122

FEI Number: 65-1130052

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ASTRID, FLAHERTY
8015 N.W. 29 ST
MIAMI, FL 33122 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: GONZALEZ, LUIS M
Address: 8015 N.W. 29 ST
City-St-Zip: MIAMI, FL 33122

Title: S () Delete
Name: CARDONA, ANA B
Address: 8015 N.W. 29 ST
City-St-Zip: MIAMI, FL 33122

Title: T () Delete
Name: COBO, FERNANDO
Address: 8015 NW 29TH STREET
City-St-Zip: MIAMI, FL 33122

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: FERNANDO COBO

T

04/24/2009

Electronic Signature of Signing Officer or Director

_____ Date