FOR PROFIT CORPORATION

May 13, 2002 8:00 am

ONITONIN BUSINESS REPURI (UBK)				May 13, 2002 6.00 an	
DOCUMENT # POLOCO 106711 1. Entity Name				Secretary of State 05-13-2002 90159 032 ***150.00	
LUCIANO ELECTRIC NC.					
DO NOT WRITE IN THIS SPACE					
2. Principal	Place of Business NBAY5 HORE DR.	3. Mailing Address			
Suite, Apt. #, etc. Apr. 3536 Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE		
City & State City & State City & State		City & State		4. FEI Number	Applied For
Zip Country 33/32 US		Zip Country			Not Applicable 5 Additional equired
		·		7. Name and Address of Current Registered Agen	•
		····	Name Da a	Name	
DO NOT WRITE IN THIS SPACE			Street Address (P.O. Box Number is Not Acceptable) 1717 N BAYSHUE DE		
			1 1		
			City	36 FL Zig	Code 33132
8. The above named entity submits this statement for the purpose of changing its registered office or registered at				ered agent, or both, in the State of Florida.	13132
SIGNATURE	Signature, typed or printed name of registered agent an	id title if applicable (NOTE: I	Registered Agent signature require		
O This save			y 1 Fee is \$150.00	ed when reinstating) DATE	****
Tax filing requirement and elects to do so. After May Amended		Fee is \$550.00 UBR is \$61.25 to Department of St.	I Trust Fund Contribution I I a	5.00 May Be Added to Fees	
11.	OFFICERS AND D	DIRECTORS	I	4.0	
TITLE	PD		TITLE		
NAME	PETRICA L Georg	escu	NAME		
STREET ADDRESS CITY-ST-ZIP	MIAMI BAYSHUR	De #3536	STREET ADDRÉSS CITY-ST-ZIP		1
TITLE			TITLE		
NAME STREET ADDRESS		i	NAME		
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13 Thereby of	artify that the information available the	2-22-1			

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 attachment with an actions, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

+ PESIDENT