## FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR) rille DOCUMENT # PO1000109944 BLUBE FARY OF STALL THIN OF CORPORATION LuJo's Painters Group 03 FEB -6 PM 4: 19 700011902827 02/06/03--01024--011 \*\*\*300.00 DO NOT WRITE IN THIS SPACE 2. Principal Place of Business 3. Mailing Address 4414 W. Elm St. 4414 W. Elm St. Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For Tampa, Fl. 59-3756735 Tampa Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired  $\Gamma$ 33614 Hills. 33614 Hills Fee Required 7. Name and Address of Current Registered Agent Lucia Menendez DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE 4414 W. Elm St. City Tampa Zip Code 33614 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. Lucia Menendez 01/30/03 SIGNATURE A (NOTE: Registered Agent signature required when reinstating) January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 9. Election Campaign Financing \$5.00 May Be Amended UBR is \$61.25 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS TITLE TITLE P/D/M NAME NAME Lucia Menendez STREET ADDRESS STREET ADORESS 4414 W. Eim St. Tampa, Fl. 33614 CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE Vice Presideent NAME NAME Jose Valadez STREET ADDRESS STREET ADDRESS 4414 W. Elm St Tampa, Fl. 33614 CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE IN THIS SPACE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS

12. Thereby 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 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 on an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

Lucia Menendez

OFFICER OR DIRECTOR

01/30/03

813-363-0886

CR2E034B (12/02)

Department of State
Division of Corporations

To whom it may concern:

The following letter is to inform you, that due to a change in address we did not receive the uniform business report for the year 2002. We did receive a letter that was forwarded to our new address stating that Lujo's Painters group was dissolved.

I spoke with a very helpful and cordial representative of your office named Tyrone that informed me that because of this change of address and not having received the first or second notice, to send this letter to you and have this reinstatement fee waived. He also advised me to send the payment of \$150.00 dollars for each year (2002,2003), which is enclosed with this letter.

I'm sorry for the inconvenience and really appreciate all of your time.

Sincerely,

Lucia Menendez

Lujo's Painters Group

4414 W. Elm St.

Tampa, FI 33614