

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 29, 2002 8:00 am
Secretary of State

05-29-2002 90682 034 ***150.00

U1943/ AI

DOCUMENT # P01000122471

1. Entity Name

L.A. STUCCO, INC.

Principal Place of Business

2429 CANCUN CT.
 KISSIMMEE FL 34743

Mailing Address

2429 CANCUN CT.
 KISSIMMEE FL 34743

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

600000984

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

AGUILAR, LEONIDAS
 2429 CANCUN CT.
 KISSIMMEE FL 34743

7. Name and Address of New Registered Agent

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input type="checkbox"/> Delete
NAME	AGUILAR, LEONIDAS	
STREET ADDRESS	2429 CANCUN CT.	
CITY-ST-ZIP	KISSIMMEE FL 34743	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
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TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
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CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SILVANO AGUILAR
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)

Attachment

436767
P01000122471

LA STUCCO INC.

2429 CANCUN CT
KISSIMMEE, FL 34744

PHONE: 407-348-4370

MAY 15, 2002

DIVISION OF CORPORATIONS
UNIFORM BUSINESS REPORT FILINGS
P.O. BOX 1500
TALLAHASSEE, FL 32302-1500

RE: L.A. STUCCO INC.

DOCUMENT # P01000122471

EIN # 60-000084

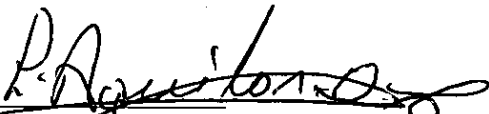
TO WHOM IT MAY CONCERN:

ENCLOSED YOU WILL FIND MY FILLING FEE OF \$150.00 FOR MY CORPORATION. I JUST RECEIVED THE PAPERS YESTERDAY AND I AM SENDING IT OUT TODAY.

IF YOU HAVE ANY QUESTION REGARDING THIS MATTER PLEASE FEEL FREE TO CALL ME AT 407-348-4370 AS YOUR EARLY CONVENIENCE.

THANK YOU FOR YOUR ATTENTION ON THIS MATTER.

SINCERELY,


LEONIDAS AGUILAR
PRESIDENT