


FOR PROFIT CORPORATION ANNUAL REPORT

For Office Use Only
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| DOCUMENT # P02000016636 |  |
| 1. Entity Name PROMOCIONES LURUDO INC. | |

FILED
11 JUN -2 PM 3:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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| 2. Principal Place of Business - No P.O. Box # 8940 SW 162 TERR | 3. Mailing Address 8940 SW 162 TERR |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |

CR2E034B (1/11)

| | | | |
|---|--------------------------|--------------------------------|-------------------------------|
| City & State Miami FL | City & State Miami FL | 4. FEI Number 01-0597593 | Applied For Not Applicable |
| Zip 33157 | Country USA | Zip 33157 | Country USA |
| 5. Certificate of Status Desired <input type="checkbox"/> | | \$8.75 Additional Fee Required | |

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| 7. Name and Address of Current Registered Agent | |
| Name Tori Romero Victor E | |
| Street Address (P.O. Box Number is Not Acceptable) 8940 SW 162 TERR | |
| City Miami | FL Zip Code 33157 |

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|---|----------------|
| 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 Victor E Tori | DATE 6/1/11 |

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| January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended AR is \$61.25 Make Check Payable to Florida Department of State | 9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees | E-mail Address: PROMOCIONESLURUDOCA@Hotmail.com E-mail address to be used for future annual report notices. |
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| 10. OFFICERS AND DIRECTORS | |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PRESIDENT TORI ROMERO VICTOR E 8940 SW 162 TERR MIAMI FL 33157 |
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| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s. 817.155 F.S. | |
| SIGNATURE: Victor E Tori | DATE 6/1/11 |