

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000016393

Entity Name: LUIS MESONES, CORP.

FILED
Apr 15, 2006
Secretary of State

Current Principal Place of Business:

6292 NW 186 ST.
APT. # 112
MIAMI, FL 33015

New Principal Place of Business:

15760 BULL RUN RD.
APT. # 171
MIAMI LAKES, FL 33014

Current Mailing Address:

6292 NW 186 ST.
APT. # 112
MIAMI, FL 33015

New Mailing Address:

15760 BULL RUN RD.
APT. # 171
MIAMI LAKES, FL 33014

FEI Number: 04-3667978

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MESONES, LUIS
6292 NW 186 ST.
APT. # 112
MIAMI, FL 33015 US

Name and Address of New Registered Agent:

MESONES, LUIS
15760 BULL RUN RD.
APT. # 171
MIAMI LAKES, FL 33014 US

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:

04/15/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MESONES, LUIS
Address: 6292 NW 186 ST. APT. # 112
City-St-Zip: MIAMI, FL 33015

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MESONES, LUIS
Address: 15760 BULL RUN RD. APT. # 171
City-St-Zip: MIAMI LAKES, FL 33014

I hereby certify that the information supplied with this filing does not qualify for the 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: MESONES LUIS

P

04/15/2006

Electronic Signature of Signing Officer or Director

Date