2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000045047

Entity Name: LUXURY FOR LESS, INC.

ORLANDO, FL 32808

City-St-Zip:

FILED Apr 07, 2009 Secretary of State

Current P	rincipal Place of Business:	New Principal Place	New Principal Place of Business:	
	OLONIAL DRIVE D, FL 32808			
Current M	lailing Address:	New Mailing Addres	New Mailing Address:	
4211 W. COLONIAL DRIVE ORLANDO, FL 32808		P O BOX 617349 ORLANDO, FL 32861	P O BOX 617349 ORLANDO, FL 328617349 US	
FEI Number	: FEI Number Applied For (X)	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		: Name and Address o	Name and Address of New Registered Agent:	
ORLANDO The above	SBIR S OLONIAL DRIVE), FL 32808 US named entity submits this statement for t	the purpose of changing its registere	d office or registered agent, or both,	
SIGNATU				
01011/1101	Electronic Signature of Registered	Agent	 Date	
Election Car	mpaign Financing Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () Delete KALSI, JASBIR S 4211 W COLONIAL DRIVE ORLANDO, FL 32808	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	VPST () Delete HANS, KAMAL 4211 W COLONIAL DRIVE	Title: Name: Address:	() Change () Addition	

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: KAMAL HANS VPST 04/07/2009