

**2010 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P03000068728

Entity Name: LUIS INSURANCE, INC.

**FILED**  
**Aug 28, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

6851 BIRD ROAD  
MIAMI, FL 33155

**New Principal Place of Business:**

**Current Mailing Address:**

6851 BIRD ROAD  
MIAMI, FL 33155

**New Mailing Address:**

FEI Number: 54-2114870

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FIGUERAS, JUAN E  
7050 SW 86TH AVE.  
MIAMI, FL 33143 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: PVST  
Name: LUIS, MARGIE M  
Address: 6851 BIRD ROAD  
City-St-Zip: MIAMI, FL 33155

I hereby 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 all other like empowered.

SIGNATURE: MARGIE M. LUIS

PRES

08/28/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date