

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000115319

Entity Name: LUIS STUCCO, INC.

FILED
Apr 12, 2006
Secretary of State

Current Principal Place of Business:

55 NEBRASKA AVE N.E.
FORT WALTON BEACH, FL 32548

New Principal Place of Business:

226 STAFF DRIVE
FORT WALTON BEACH, FL 32548

Current Mailing Address:

55 NEBRASKA AVE N.E.
FORT WALTON BEACH, FL 32548

New Mailing Address:

226 STAFF DRIVE
FORT WALTON BEACH, FL 32548

FEI Number: 20-0308905

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SALVIN, LUIS A
55 NEBRASKA AVE N.E.
FORT WALTON BEACH, FL 32548 US

Name and Address of New Registered Agent:

SALVIN, LUIS A
226 STAFF DRIVE
FORT WALTON BEACH, FL 32548 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: CHRISTOPHER O MARSH

04/12/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SALVIN, LUIS A
Address: 10 FLEET ST.
City-St-Zip: FORT WALTON BEACH, FL 32548

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SALVIN, LUIS A
Address: 226 STAFF DRIVE
City-St-Zip: FORT WALTON BEACH, FL 32548

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: LUIS SALVIN

PSD

04/12/2006

Electronic Signature of Signing Officer or Director

Date