2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000049670

Title:

Name: Address:

City-St-Zip:

FILED Sep 24, 2008 Secretary of State

Entity Name: LOERA LEGACY, INC. **Current Principal Place of Business: New Principal Place of Business:** 7355 BROADMOOR STREET NAVARRE, FL 32566 **Current Mailing Address: New Mailing Address:** 7355 BROADMOOR STREET NAVARRE, FL 32566 FEI Number: 20-0935021 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LOERA, JUAN E 7355 BROADMOOR STREET GULF BREEZE, FL 32563 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition JUAREZ, MARIA T Name: Name: 7355 BROADMOOR STREET Address: Address: City-St-Zip: NAVARRE, FL 32566 City-St-Zip: Title: VΡ Title: () Delete (X) Change () Addition LOERA, JUAN E Name: LOERA, MARCO A Name: 7355 BROADMOOR STREET 7355 BROADMOOR STREET Address: Address: NAVARRE, FL 32566 City-St-Zip: NAVARRE, FL 32566 City-St-Zip: Title: Title: (X) Change () Addition () Delete LOERA, JUAN E TORREZ, FRANCISCO Name: Name: 7355 BROADMOOR STREET 7355 BROADMOOR STREET Address: Address: City-St-Zip: NAVARRE, FL 32566 City-St-Zip: NAVARRE, FL 32566

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: JUAN EDGARDO LOERA T 09/24/2008

() Delete

() Change (X) Addition

BRIONES, GERARDO

NAVARRE, FL 32566

7355 BROADMOOR STREET