2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000049670

Entity Name: LOERA LEGACY, INC.

FILED May 01, 2009 Secretary of State

Entity Nai	me: LOERA L	LEGACY, INC.			
Current Principal Place of Business:			New Principal Place of Business:		
	ADMOOR STI E, FL 32566	REET			
Current M	lailing Addre	ss:	New Mailing Address:		
	ADMOOR STI E, FL 32566	REET			
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	Name and Address of New Registered Agent:	
LOERA, JUAN E 7355 BROADMOOR STREET GULF BREEZE, FL 32563 US			LOERA, JUAN E 7355 BROADMOOR S' NAVARRE, FL 32566	TREET US	
	named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATUR	RE:			05/01/2009	
	Electro	nic Signature of Registered Age	ent	Date	
		93(2)(b), F.S., the corporation did no	t receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P (JUAREZ, MAR 7355 BROADM NAVARRE, FL	100R STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T (LOERA, JUAN 7355 BROADM NAVARRE, FL	100R STREET	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D (X TORREZ, FRA 7355 BROADM NAVARRE, FL	100R STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	D (X BRIONES, GEI	() Delete RARDO	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: JUAN E. LOERA T 05/01/2009

7355 BROADMOOR STREET

NAVARRE, FL 32566

Address:

City-St-Zip: