

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000067943

FILED  
Apr 28, 2008  
Secretary of State

Entity Name: LIGHT BULBS & SERVICES, INC.

## Current Principal Place of Business:

651 NW 82ND AVE.  
#111  
MIAMI, FL 33126

## New Principal Place of Business:

## Current Mailing Address:

651 NW 82ND AVE.  
#111  
MIAMI, FL 33126

## New Mailing Address:

FEI Number: 75-3154044      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ESCALANTE, ERNESTO B  
651 NW 82ND AVE.  
#111  
MIAMI, FL 33126 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: ESCALANTE, ERNESTO B  
Address: 651 NW 82ND AVE. #111  
City-St-Zip: MIAMI, FL 33126

Title: TD ( ) Delete  
Name: FUENMAYOR, JAVIER  
Address: 651 NW 82ND AVE. #111  
City-St-Zip: MIAMI, FL 33126

Title: S ( ) Delete  
Name: HIDALGO, ESTRELLA A  
Address: 651 NW 82ND AVENUE, #111  
City-St-Zip: MIAMI, FL 33126

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S (X) Change ( ) Addition  
Name: ESCALANTE, JOSE E  
Address: 651 NW 82ND AVENUE, #111  
City-St-Zip: MIAMI, FL 33126

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: ERNESTO B ESCALANTE

PD

04/28/2008

Electronic Signature of Signing Officer or Director

Date