2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000133859

Entity Name: LA LLACUNA CORP.

FILED Mar 19, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2856 GARDEN DR APT 109 2856 GARDEN DR SOUTH LAKE WORTH, FL 33461

APT #109

LAKE WORTH, FL 33461

Current Mailing Address: New Mailing Address:

2856 GARDEN DR APT 109 2856 GARDEN DR SOUTH APT 109

LAKE WORTH, FL 33461 APT #109

LAKE WORTH, FL 33461

FEI Number: 34-2018540 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

FIGUERA, MARIA G FIGUERA, MARIA G 2856 GARDEN DR 2856 GARDEN DR SOUTH **APT 109** APT 109

LAKE WORTH, FL 33461 US LAKE WORTH, FL 33461 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: MARIA G. FIGUERA 03/19/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

Name: FIGUERA, MARIA G Name: FIGUERA, MARIA G 2856 GARDEN DR APT 109 2856 GARDEN DR SOUTH APT 109 Address: Address:

City-St-Zip: LAKE WORTH, FL 33461 City-St-Zip: LAKE WORTH, FL 33461

() Delete Title: SVP Title: SVP (X) Change () Addition Name: FIGUERA, ROBERTO J

Name: FIGUERA, ROBERTO J

2856 GARDEN DR APT 109 Address: 2856 GARDEN DR SOUTH APT 109 Address: LAKE WORTH, FL 33461 LAKE WORTH, FL 33461 City-St-Zip: City-St-Zip:

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: MARIA G FIGUERA **DPT** 03/19/2007