

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000148536

Entity Name: LURO ENTERPRISES, INC.

FILED  
Sep 07, 2005  
Secretary of State

## Current Principal Place of Business:

3259 W. SOUTH STREET  
ORLANDO, FL 32805

## New Principal Place of Business:

3249 W. SOUTH STREET  
ORLANDO, FL 32805

## Current Mailing Address:

3259 W. SOUTH STREET  
ORLANDO, FL 32805

## New Mailing Address:

3249 W. SOUTH STREET  
ORLANDO, FL 32805

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PRIESTER, ROSA L  
3259 W. SOUTH STREET  
ORLANDO, FL 32805 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: PRIESTER, ROSA L  
Address: 3259 W. SOUTH STREET  
City-St-Zip: ORLANDO, FL 32805

Title: VP ( ) Delete  
Name: PRIESTER, KEVIN  
Address: 3259 W. SOUTH STREET  
City-St-Zip: ORLANDO, FL 32805

Title: T ( ) Delete  
Name: PRIESTER, LUTHER SR.  
Address: 3259 W. SOUTH STREET  
City-St-Zip: ORLANDO, FL 32805

Title: S ( ) Delete  
Name: PARAMORE, SHERRY P  
Address: 4543 LIGUSTRUM WAY  
City-St-Zip: ORLANDO, FL 32839

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ROSA L PRIESTER

P

09/07/2005

Electronic Signature of Signing Officer or Director

Date