

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000047024

Entity Name: L.H.C. PRESTES, INC.

FILED  
Apr 25, 2007  
Secretary of State

**Current Principal Place of Business:**

1338 PLEASANT OAK LN  
ORLANDO, FL 32804

**New Principal Place of Business:**

4403 SPRING BLOSSOM DR  
KISSIMMEE, FL 34746

**Current Mailing Address:**

1338 PLEASANT OAK LN  
ORLANDO, FL 32804

**New Mailing Address:**

4403 SPRING BLOSSOM DR  
KISSIMMEE, FL 34746

FEI Number: 41-2171986

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PRESTES, LUIZ H  
1338 PLEASANT OAK LN  
ORLANDO, FL 32804 US

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

PRESTES, LUIZ H  
4403 SPRING BLOSSOM DR  
KISSIMMEE, FL 34746 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: LUIZ HENRIQUE PRESTES

04/25/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: PRESTES, LUIZ H  
Address: 1338 PLEASANT OAK LN  
City-St-Zip: ORLANDO, FL 32804

Title: VP ( ) Delete  
Name: PRESTES, HELEN M  
Address: 1338 PLEASANT OAK LN  
City-St-Zip: ORLANDO, FL 32804

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: PRESTES, LUIZ H  
Address: 4403 SPRING BLOSSOM DR  
City-St-Zip: KISSIMMEE, FL 34746

Title: VP (X) Change ( ) Addition  
Name: PRESTES, HELEN M  
Address: 4403 SPRING BLOSSOM DR  
City-St-Zip: KISSIMMEE, FL 34746

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: LUIZ HENRIQUE PRESTES

P

04/25/2007

Electronic Signature of Signing Officer or Director

Date