

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000056509

Entity Name: MARIA LUCIA HOSTRUP, INC.

FILED
May 01, 2008
Secretary of State

Current Principal Place of Business:

7680 N.W. 120TH DRIVE
PARKLAND, FL 33076

New Principal Place of Business:

3201 NE 183 ST #2606
AVENTURA, FL 33160

Current Mailing Address:

7680 N.W. 120TH DRIVE
PARKLAND, FL 33076

New Mailing Address:

3201 NE 183 ST #2606
AVENTURA, FL 33160

FEI Number: 20-1590110

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOSTRUP, MARIA LUCIA
7680 N.W. 120TH DRIVE
PARKLAND, FL 33076 US

Name and Address of New Registered Agent:

HOSTRUP, MARIA LUCIA
3201 NE 183 ST #2606
AVENTURA, FL 33160 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:

05/01/2008

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: HOSTRUP, MARIA LUCIA
Address: 7680 N.W. 120TH DRIVE
City-St-Zip: PARKLAND, FL 33076

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: ML HOSTRUP

PRES

05/01/2008

Electronic Signature of Signing Officer or Director

Date