2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000073107

Entity Name: LUZEN PROPERTIES, INC.

FERNANDEZ, BELKIS

BRANDON, FL 33155

1626 HULETT DR

Name:

Address:

City-St-Zip:

FILED Feb 02, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1925 SW 8 STREET MIAMI, FL 33135 **Current Mailing Address: New Mailing Address:** 1925 SW 8 STREET MIAMI, FL 33135 FEI Number: 20-2866808 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FONSECA, LUIS JR 2211 COUNTRY CLUB PRADO CORAL GABLES, FL 33134 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition FONSECA, LUIS JR Name: Name: 2211 COUNTRY CLUB PRADO Address: Address: City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: () Delete Title: VPD Title: VPD (X) Change () Addition Name: FONSENCA, ZENAIDA Name: FONSECA, ZENAIDA 2211 COUNTRY CLUB PRADO 2211 COUNTRY CLUB PRADO Address: Address: CORAL GABLES, FL 33134 City-St-Zip: City-St-Zip: CORAL GABLES, FL 33134 () Delete Title: Title: TD () Change () Addition GREGOIRE, CINTHIA Name: Name: 1523 PALERMO Address: Address: City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: Title: () Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: ZENAIDA FONSECA VP 02/02/2006