

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000073107

Entity Name: LUZEN PROPERTIES, INC.

FILED
Apr 30, 2008
Secretary of State

Current Principal Place of Business:

1925 SW 8 STREET
MIAMI, FL 33135

New Principal Place of Business:

1923 SW 8 STREET
MIAMI, FL 33135

Current Mailing Address:

1925 SW 8 STREET
MIAMI, FL 33135

New Mailing Address:

2211 COUNTRY CLUB PRADO
CORAL GABLES, FL 33134

FEI Number: 20-2866808

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FONSECA, LUIS JR
5740 SW 47 STREET
MIAMI, FL 33155 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FONSECA, LUIS JR
Address: 5740 SW 47 STREET
City-St-Zip: MIAMI, FL 33155

Title: VPD () Delete
Name: FONSECA, ZENaida
Address: 2211 COUNTRY CLUB PRADO
City-St-Zip: CORAL GABLES, FL 33134

Title: TD () Delete
Name: GREGOIRE, CINTHIA
Address: 1523 PALERMO
City-St-Zip: CORAL GABLES, FL 33134

Title: SD () Delete
Name: FERNANDEZ, BELKIS
Address: 1626 HULETT DR
City-St-Zip: BRANDON, FL 33155

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 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: ZENaida FONSECA

VP

04/30/2008

Electronic Signature of Signing Officer or Director

Date