

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000114533

Entity Name: LUCAS CONSULTING, INC.

FILED
Aug 20, 2008
Secretary of State

Current Principal Place of Business:

17011 N. BAY RD #816
SUNNY ISLES BEACH, FL 33160

New Principal Place of Business:

8040 NW 155 STREET
209
MIAMI LAKE, FL 33016

Current Mailing Address:

17011 N. BAY RD #816
SUNNY ISLES BEACH, FL 33160

New Mailing Address:

8040 NW 155 STREET
209
MIAMI LAKES, FL 33016

FEI Number: 20-3335391

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FONTE, ERIC
17011 N. BAY RD #816
SUNNY ISLES BEACH, FL 33160 US

Name and Address of New Registered Agent:

FONTE, ERIC
8040 NW 155 STREET
209
MIAMI LAKES, FL 33016 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: ERIC FONTE

08/20/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FONTE, ERIC
Address: 17011 NORTH BAY ROAD, APT 816
City-St-Zip: SUNNY ISLES BEACH, FL 33160

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FONTE, ERIC
Address: 8040 NW 155TH STREET STE 209
City-St-Zip: MIAMI LAKES, FL 33016

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: ERIC J FONTE

P

08/20/2008

Electronic Signature of Signing Officer or Director

Date