## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000132887

RUIZ-CAMPO, MARTHA L

20965 DEL CASA DRIVE

BOCA RATON, FL 33433

Name:

Address:

City-St-Zip:

Entity Name: MYLUSA, INC.

FILED Apr 05, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 2109 BRIDGEWOOD DRIVE BOCA RATON, FL 33434 **Current Mailing Address: New Mailing Address:** 132 MINORCA AVENUE 354 ESPLANADE CORAL GABLES, FL 33134 BOCA RATON, FL 33432 FEI Number: 41-2210702 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: MEJIA, MANUEL A 2109 BRIDGEWOOD DRIVE BOCA RATON, FL 33434 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 Name: MEJIA DALMAU, MANUEL A Name: 2109 BRIDGEWOOD DR Address: Address: City-St-Zip: BOCA RATON, FL 33434 City-St-Zip: Title: Title: () Delete () Change () Addition Name: TOBAR CASTILLO, MARIA T Name: 2109 BRIDGEWOOD DRIVE Address: Address: BOCA RATON, FL 33434 City-St-Zip: City-St-Zip: Title: Title: ( ) Delete () Change () Addition SALAS, ASTRID Name: Name: 2109 BRIDGEWOOD DRIVE Address: Address: City-St-Zip: BOCA RATON, FL 33434 City-St-Zip: Title: (X) 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: MARIA TERESA TOBAR S 04/05/2007