## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000146434

Entity Name: LUXURY REAL ESTATE GROUP INTERNATIONAL, INC.

FILED Apr 08, 2009 Secretary of State

| Current Principal Plac | e of Business: | <b>New Princi</b> | pal Place of Business |
|------------------------|----------------|-------------------|-----------------------|
|                        |                |                   |                       |

LRG INTERNATIONAL, INC 100 VILLAGE SQUARE CROSSING, SUITE 202

PALM BEACH GARDENS, FL 33410 US

**Current Mailing Address:** 

LRG INTERNATIONAL, INC 100 VILLAGE SQUARE CROSSING, SUITE 202 PALM BEACH GARDENS, FL 33410

FEI Number: 20-3715816 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:

ROBIN, LOREN A 100 VILLAGE SQUARE CROSSING, SUITE 202 PALM BEACH GARDENS, FL 33410

ROBIN, LOREN A 800 VILLAGE SQUARE CROSSING, SUITE 112 PALM BEACH GARDENS, FL 33410

800 VILLAGE SQUARE CROSSING, SUITE 112

800 VILLAGE SQUARE CROSSING, SUITE 112

PALM BEACH GARDENS, FL 33410 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: LOREN A. ROBIN 04/08/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: ( ) Delete ROBIN, LOREN

Name: 100 VILLAGE SQUARE CROSSING, SUITE 202 Address:

City-St-Zip: PALM BEACH GARDENS, FL 33410 US

VΡ (X) Delete Title: Name: MOORE, JODI L

100 VILLAGE SQUARE CROSSING, SUITE 202 Address: PALM BEACH GARDENS, FL 33410 US City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change ( ) Addition

Name: ROBIN, LOREN

LRG INTERNATIONAL, INC.

LRG INTERNATIONAL, INC

PALM BEACH GARDENS, FL 33410

**New Mailing Address:** 

800 VILLAGE SQUARE CROSSING, SUITE 112 Address: City-St-Zip: PALM BEACH GARDENS, FL 33410 US

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: LOREN A ROBIN **PRES** 04/08/2009