## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000167184

Entity Name: LION'S, CORPORATION

FILED Aug 30, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

4874 CASON COVE DR #107 6024 RALEIGH STREET ORLANDO, FL 32811

# 2813

ORLANDO, FL 32835

**Current Mailing Address: New Mailing Address:** 

4874 CASON COVE DR #107 6024 RALEIGH STREET ORLANDO, FL 32811

#2813

ORLANDO, FL 32835

FEI Number: 20-4000737 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

SILVA, LUCIANE F SILVA, LUCIANE F 4874 CASON COVE DR #107 6024 RALEIGH STREET # 2813

ORLANDO, FL 32811 ORLANDO, FL 32835 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: LUCIANE F. SILVA 08/30/2008

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition

SILVA, LUCIANE F SILVA, LUCIANE F Name: Name: 4874 CASON COVE DR #107 6024 RALEIGH STREET # 2813 Address: Address:

City-St-Zip: ORLANDO, FL 32811 City-St-Zip: ORLANDO, FL 32835

VΡ Title: VΡ Title: () Delete (X) Change ( ) Addition DA SILVA, JAMIR L Name: Name: DA SILVA. FLAVIO REIMAO 4874 CASON COVE DR #107 6024 RALEIGH STREET # 2813 Address: Address:

ORLANDO, FL 32811 ORLANDO, FL 32835 City-St-Zip: City-St-Zip:

() Delete Title: (X) Change ( ) Addition Title: FREITAS, FLAVIA C E SILVA, ELTON DE LIMA Name: Name: 4874 CASON COVE DR #107 6024 RALEIGH STREET # 2813 Address: Address:

City-St-Zip: ORLANDO, FL 32811 City-St-Zip: ORLANDO, FL 32835

Title: () Delete Title: ( ) Change (X) Addition DA SILVA FILHO, CELSO M Name: Name: Address: Address: 6024 RALEIGH STREET # 2813

City-St-Zip: City-St-Zip: ORLANDO, FL 32835

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: LUCIANE F. SILVA PD 08/30/2008