2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000099937

Entity Name: LUNAS LAWN SERVICE INC

FILED Jun 27, 2009 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:		
814 PALW FORT PIE	1 AVE ERCE, FL 34982	2		
Current Mailing Address:		New Mailing Address:		
814 PALW FORT PIE	1 AVE ERCE, FL 34982	2		
FEI Number	r: 20-5365866	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of C	urrent Registered Agent:	Name and Address o	f New Registered Agent:
LUNA, SA 814 PALW FORT PIE		2 US		
	e named entity s e of Florida.	submits this statement for the	purpose of changing its registered	d office or registered agent, or both,
SIGNATU				
SIGNATU		ic Signature of Registered A	gent	 Date
In accordar	Electron	ic Signature of Registered Ag 3(2)(b), F.S., the corporation did r 1 Trust Fund Contribution ().		Date
In accordar Election Ca	Electron	3(2)(b), F.S., the corporation did r Trust Fund Contribution ().	not receive the prior notice.	Date ES TO OFFICERS AND DIRECTORS:
In accordar Election Ca	Electron nce with s. 607.193 mpaign Financing S AND DIRECT	3(2)(b), F.S., the corporation did r Trust Fund Contribution (). FORS: Delete DR	not receive the prior notice.	
In accordar Election Ca OFFICER Title: Name: Address:	Electron nce with s. 607.193 mpaign Financing S AND DIRECT P () LUNA, SALVADO 814 PALM AVE FORT PIERCE,	B(2)(b), F.S., the corporation did r Trust Fund Contribution (). FORS: Delete DR FL 34982 Delete UNA, SARA	not receive the prior notice. ADDITIONS/CHANGI Title: Name: Address:	ES TO OFFICERS AND DIRECTORS:

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: SALVADOR LUNA P 06/27/2009