06-25-2007 90001 020 \*\*\*158.75 P06000119810

## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

| ANNUAL REPORT  |               |                                |                 |                        |                  |                          |  |                         | r= 1.1                       | m D           |                       |                |  |
|--|---------------|--------------------------------|-----------------|------------------------|------------------|--------------------------|--|-------------------------|------------------------------|---------------|-----------------------|----------------|--|
| DOCUMENT # P06000119810  |               |                                |                 |                        |                  |                          |  | FILED                   |                              |               |                       |                |  |
| 1. Entity Name LUNA DOORS INC  |               |                                |                 |                        |                  |                          |  | 0.                      |                              | 5 AM I        |                       |                |  |
| Principal Place of Business Mailing Address  |               |                                |                 |                        |                  |                          | ستنظ   | 81116                   | ECRETAR<br>LELĀHASS          | FE EL 0       | ATE<br>NDID∦          |                |  |
| Principal Place of Business Mailing Address 1371 NE 23 PLACE 1371 NE 23 PLACE  |               |                                |                 |                        |                  |                          |  | 4047                    | ELVHV22                      | CC, FLC       | RUM                   |                |  |
| POMPANO BEACH, FL 33064 US POMPANO BEACH, FL 330   |               |                                |                 |                        |                  | US                       |  |                         | E <b>r</b> ub bini beni beni |               | tala i reisi kipir de | hillei al lega |  |
| Principal Place of Business - No P.O. Box # 3. Mailing Address   |               |                                |                 |                        |                  |                          |  |                         |                              |               |                       |                |  |
| Suite, Apt. #, etc.  |               |                                |                 | Suite, Apt. #, etg.    |                  |                          |  | 06082007                | Chg-P                        | CBAE          | 034 (12/06)           |                |  |
| City & State   |               |                                |                 | City & State           |                  |                          |  | 4. FEI Numbe            |                              |               |                       | pplied For     |  |
|  |               |                                | WESTO           | FL                     |                  |                          | 55789  | 22                      | <del> </del>                 | ot Applicable |                       |                |  |
| Zip  |               | Country                        |                 | <i>3333/</i>           | C <u>ou</u> l    | n <u>t</u> ry            |  | 5. Certificate          | of Status Desired            | X             | \$8.75 Add            |                |  |
| 6. Name and Address of Current Registered Agent  |               |                                |                 |                        |                  |                          |  | 7. Name and             | Address of New               | Registered    | Agent                 |                |  |
| ALVARAD  | O. LUIS A     | 4                              |                 |                        |                  | Name                     |  |                         |                              |               |                       |                |  |
| 1371 NE 23 PLACE<br>POMPANO BEACH, FL 33064  |               |                                |                 |                        |                  |                          | Street Address (P.O. Box Number is Not Acceptable) |                         |                              |               |                       |                |  |
|  |               |                                |                 |                        |                  |                          |  |                         |                              | FI            | Zip Cod               | e e            |  |
| The above named entity submits this statement for the purpose of changing its registered office or regist the obligations of registered agent.   |               |                                |                 |                        |                  |                          |  | ed agent, or bot        | h, in the State of           |               | <b>-</b>   `          |                |  |
| _<br>  | ions or regis | tered agent.                   |                 |                        |                  |                          |  |                         |                              |               |                       |                |  |
| SIGNATURE  |               |                                |                 |                        |                  |                          |  |                         |                              |               |                       | <del></del>    |  |
| FILE NOWILL FEE IS \$550,00 9. Election Campaign Financing \$5.00 May Be   |               |                                |                 |                        |                  |                          |  |                         |                              |               |                       |                |  |
|  | ue by Sei     |                                |                 |                        | d Contribution   |                          |  | 00 May Be<br>ed to Fees |                              |               |                       |                |  |
| 10.  |               |                                | FICERS AND      | DIBECTORS              | 11.              |                          |  | ADDITIONS/              | CHANGES TO O                 | FEICEDS AN    | N DIRECTOR            | <u> </u>       |  |
| TITLE  | PVST          |                                |                 | ☐ Delet                |                  |                          | TPV  | <del>7-</del>           |                              | -             | Change                | Addition       |  |
| NAME   |               | DO, LUIS A                     |                 |                        | NAI              | ME                       | ALVA   | RADO,                   | 23 74                        | 4             | <b>—</b>              |                |  |
| STREET ADDRESS<br>CITY+ST+ZIP  | ı             | 23 PLACE<br>IO BEACH,          | E1 22064        |                        |                  | EET AOORESS<br>Y-ST-ZIP  | /37  | / NE                    | 23 747                       |               |                       |                |  |
| TOTLE  | FOWEAK        | O BEACH,                       | 11 33004        | ☐ Dete                 |                  |                          | ᡶ -  |                         |                              |               | Change                | Addition       |  |
| MARKE  |               |                                |                 | J064G                  | NAS.             |                          | ALV  | ARADO                   | GLOA                         | ?/Д           |                       | Addition       |  |
| STREET ADDRESS   |               |                                |                 |                        |                  | EET ADDRESS              | /37  | Y NE                    | 23 7                         | ZACE          |                       |                |  |
| CITY-ST-ZIP  |               |                                | <del></del>     |                        |                  | Y-51-ZIP                 | 701  | PANO                    | BEACH                        | <u>_FL</u>    | <u>- 330</u>          | 64             |  |
| TITLE<br>NAME  |               |                                |                 | ☐ Delet                | e Tate           |                          |  |                         |                              |               | ☐ Change              | ☐ Addition     |  |
| STREET ADDRESS   | ·             |                                |                 |                        |                  | EET ADDRESS              |  |                         |                              |               |                       |                |  |
| CITY - \$1 - ZIP   | <u></u> .     |                                | <u>.</u>        |                        | CIT              | Y-S1-ZIP                 | <u> </u>   |                         |                              |               |                       |                |  |
| THE  |               |                                |                 | Deket                  | -                |                          |  |                         |                              |               | Change                | ☐ Addition     |  |
| NAME<br>STREET ADDRESS   | ļ             |                                |                 |                        | NAM<br>SIR       | re<br>Eet adoress        |  |                         |                              |               |                       |                |  |
| CITY-ST-ZIP  |               |                                |                 |                        |                  | Y-\$1-ZIP                |  |                         |                              |               |                       |                |  |
| TITLE  |               |                                |                 | Oele                   | e III            | ť                        |  |                         |                              |               | Change                | Addition       |  |
| NAME<br>STREET ADDRESS   |               |                                |                 |                        | MAA<br>STR       | KE<br>Leet address       |  |                         |                              |               |                       |                |  |
| CITY-ST-ZIP  |               |                                |                 |                        |                  | Y - ST - ZIP             |  |                         |                              |               |                       |                |  |
| TITLE  |               |                                | 7. 1            | ☐ Dete                 | ie fill          | .E                       |  |                         |                              |               | Change                | ☐ Addition     |  |
| NAME   | 16            | ) 0                            | $H_{*}$ $L$     | $\sim$                 | NAA              |                          |  |                         |                              |               |                       |                |  |
| STREET ADDRESS<br>CITY - ST - ZIP  | 1             | 5 6                            | [14] [L         | · /                    |                  | ieet adoress<br>Y-SI-Zip |  |                         |                              |               |                       |                |  |
| 12. I hereby certify that the information supplied with this filing does not quality for the exemptions contained in Chapter 1.19, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 trystee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if |               |                                |                 |                        |                  |                          |  |                         |                              |               |                       |                |  |
| of the cor<br>changed.   | poration or t | he receiver of<br>achment with | or trystee empo | were to excure this    | report as requi  | ired by Ch               | apter 607  | , Florida Statute       | s; and that my na            | ime appears   | in Block 10 o         | r Block 11 it  |  |
| •  | SIGNATURE:    |                                |                 |                        |                  |                          |  |                         |                              | <b>6</b> 2    |                       |                |  |
| SIGNAT   | UHE:          | POLATUR                        | E AND TYPED OR  | RINTED NAME OF BIONING | OFFICER OR DIREC | TOR                      |  | ·                       | D/18/                        | <u>-77</u>    | Daytime Phone #       | <del></del>    |  |



## LUNA DOORS, INC. 4069 HOLLY COURT WESTON FL 33331

August 8, 2007

FLORIDA DEPARTMENT OF STATE Division of Corporations P.O. BOX 1500 TALLAHASSEE. FL 32302-1500

RE: P06000119810

We acknowledge receipt of your letter informing us that our UBR for the year 2007 has not been filed because an additional payment is required.

## We ask you kindly to review the following:

- We filed our annual report timely on May 1, 2007 (see attachment 1)
- We were not able to complete the filing of the report due DELAYS AND OVERLOAD OF or ON YOUR COMPUTER SERVER
- We were, however, able to print the information accepted by your computer and we sent it to your offices together with our check for \$158.75, on May 1, 2007 via certified mail
- We called your office on May 2<sup>nd</sup> to ask for advise concerning the incomplete filing and were told that your department would honor our filing as if it was done on May 1
- We were also told that the processing of our annual report would take about a month

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From the above, it is clear that we complied with your filing requirements and because of this, we beg you to waive the penalty of \$ 400.00 resulting from a late filing. Again, we filed and paid on May 1, 2007

We do not want LUNA DOORS INC, to be dissolved due to a misunderstanding. We should not be charged a penalty for delays resulting from circumstances beyond our control.,

We trust that the above explanation and attachments would serve as proof that it was our intention to file our UBR on a timely basis.

Sincerely

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