

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000039788

Entity Name: ORCHIDS BY LUPE CORP.

**FILED**  
**Apr 18, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

22866 SW 89 PL  
MIAMI, FL 33190

**New Principal Place of Business:**

21002 SW 92 CT  
MIAMI, FL 33189

**Current Mailing Address:**

22866 SW 89 PL  
MIAMI, FL 33190

**New Mailing Address:**

21002 SW 92 CT  
MIAMI, FL 33189

FEI Number: 20-8774886

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FLORES, ADELAIDA  
22866 SW 89 PL  
MIAMI, FL 33190 US

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

FLORES, ADELAIDA  
21002 SW 92 CT  
MIAMI, FL 33189 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: ADELAIDA FLORES

04/18/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PVPD  
Name: FLORES, ADELAIDA  
Address: 21002 SW 92 CT  
City-St-Zip: MIAMI, FL 33189

I hereby 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 all other like empowered.

SIGNATURE: ADELAIDA FLORES

PVPD

04/18/2011

Electronic Signature of Signing Officer or Director

Date