

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000097229

Entity Name: CONSULTORA L & D, INC.

FILED
Apr 27, 2008
Secretary of State

Current Principal Place of Business:

2014 SANTA BARBARA BLVD.
NAPLES, FL 34116

New Principal Place of Business:

Current Mailing Address:

2014 SANTA BARBARA BLVD.
NAPLES, FL 34116

New Mailing Address:

FEI Number: 26-0813720

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOJICA, DARWIN F
2813 47TH STREET SW
NAPLES, FL 34116 US

Name and Address of New Registered Agent:

MOJICA, DARWIN F
1744 54TH ST SW
NAPLES, FL 34116 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:

04/27/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D, P () Delete
Name: AGUILERA, LISSY B
Address: 2813 47TH STREET SW
City-St-Zip: NAPLES, FL 34116

Title: D, V () Delete
Name: GONZALEZ, SAMUEL
Address: CALLE LIBERTAD # 252
City-St-Zip: MONTERO-SANTA CRUZ, SC 00000 BO

Title: D, S () Delete
Name: MOJICA, DARWIN F
Address: 2813 47TH STREET SW
City-St-Zip: NAPLES, FL 34116

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D, P (X) Change () Addition
Name: AGUILERA, LISSY B
Address: 1744 54 TH ST SW
City-St-Zip: NAPLES, FL 34116

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D, S (X) Change () Addition
Name: MOJICA, DARWIN F
Address: 1744 54 TH ST SW
City-St-Zip: NAPLES, FL 34116

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: AGUILERA LISSY B.

DP

04/27/2008

Electronic Signature of Signing Officer or Director

Date