

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 20, 2008 8:00 am
Secretary of State

06-20-2008 90001 026 ***150.00

DOCUMENT # P07000127551

1. Entity Name
LULOR, INC.



Principal Place of Business
**9519 SW 154TH PLACE
MIAMI, FL 33196**

Mailing Address
**9519 SW 154TH PLACE
MIAMI, FL 33196**

40108743

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

P.O. Box 527443

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01142008

Chg-P

CR2E034 (12/06)

City & State

City & State
MIAMI FL

4. FEI Number

74-3243817

Applied For

Not Applicable

Zip

Country

Zip

Country

33152

USA

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**FERNANDO E VALDES, P.A
10705 NW 33RD STREET
100
MIAMI, FL 33172**

Name
FLORIDA CORPORATE REGISTERED AGENTS, LLC.

Street Address (P.O. Box Number is Not Acceptable)

7200 NW 19 ST.

SUITE 301

City
MIAMI

FL

Zip Code
33126

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

[Signature] **ED GONZALEZ, MEMBER MANAGER**

5-9-08

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
LORIS, TONI *TONI, LORIS* ☐ Delete
VIA RINALDI 1/A
RIMINI, ITALY, . 47900**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
LORIS, TONI *TONI, LORIS* ☐ Delete
VIA RINALDI 1/A
RIMINI, ITALY, . 47900**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
LORIS, TONI *TONI, LORIS* ☐ Delete
VIA RINALDI 1/A
RIMINI, ITALY, . 47900**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
MARINO, ARRIGONI
VIA FATTIBONI 15
CESENO, ITALY, . .**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-9-08

Date

Daytime Phone #

(505) 477-7442

ATTACHMENT

40108725

LULOR, INC.

P.O. BOX 527443

MIAMI, FL 33152

May 9, 2008

Florida Department of State
Division Of corporations
P. O. Box 6327
Tallahassee, FL 32314

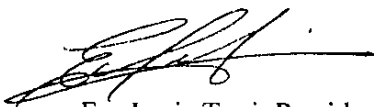
Re Lulor, Inc.
Document No. P07000127551
Annual Report
Year: 2008

Ladies and Gentlemen,

The corporation kindly requests the waiver of the \$ 400 late fee because the annual report notice was not received.

Thanking you in advance for your kind assistance I remain.

Sincerely,



For Loris Toni, President