2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000076501

Entity Name: LUENINKA FINANCIAL INCORPORATED

FILED Apr 29, 2009 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business: |
|--------------------------------------|----------------------------------|
|--------------------------------------|----------------------------------|

71 NE 27TH AVENUE POMPANO BEACH, FL 33062

Current Mailing Address: New Mailing Address:

71 NE 27TH AVENUE POMPANO BEACH, FL 33062

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

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

LUENINKA ACCOUNTING INCORPORATED

1460 NE 18TH STREET #102

LUENINKA ACCOUNTING INCORPORATED
71 NE 27TH AVENUE

FORT LAUDERDALE, FL 33305 US POMPANO BEACH, FL 33062 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: SEVERIANO ORTIZ, CPA 04/29/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Delete Title: () Change () Addition

 Name:
 MCGEACHEN, PATRICK
 Name:

 Address:
 1460 NE 18TH STREET #102
 Address:

 City-St-Zip:
 FT. LAUDERDALE, FL 33305
 City-St-Zip:

Title: D () Delete Title: D (X) Change () Addition

 Name:
 ORTIZ, SEVERIANO
 Name:
 ORTIZ, SEVERIANO

 Address:
 1460 NE 18TH STREET #102
 Address:
 71 NE 27TH AVENUE

 City-St-Zip:
 FT. LAUDERDALE, FL 33305
 City-St-Zip:
 POMPANO BEACH, FL 33062

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: SEVERIANO ORTIZ, CPA D 04/29/2009