

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000064648

**FILED**  
**Apr 20, 2011**  
**Secretary of State**

**Entity Name:** LUXURY LIFESTYLE CONCIERGE SERVICES, INC.

**Current Principal Place of Business:**

10139 N.W.129 TERR  
HIALEAH GARDENS, FL 33018

**New Principal Place of Business:**

**Current Mailing Address:**

10139 N.W.129 TERR  
HIALEAH GARDENS, FL 33018

**New Mailing Address:**

**FEI Number:** 27-3331222

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FOCH, STEEF  
10139 N.W.129 TERR  
HIALEAH GARDENS, FL 33018 US

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

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** FOCH, STEEF  
**Address:** 10139 N.W.129 TERR  
**City-St-Zip:** HIALEAH GARDENS, FL 33018 US

**Title:** VP  
**Name:** MARTINEZ, MAIDER  
**Address:** 10139 N.W.129 TERR  
**City-St-Zip:** HIALEAH GARDENS, FL 33018 US

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:** STEEF FOCH

P

04/20/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date