

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P19240

Entity Name: LORANTES, INC.

FILED
Jan 06, 2009
Secretary of State

Current Principal Place of Business:

10601-2 US HIGHWAY 441
C/O SPLISH SPLASH CAR WASH
LEESBURG, FL 34788 US

New Principal Place of Business:

Current Mailing Address:

10601-2 US HIGHWAY 441
C/O SPLISH SPLASH CAR WASH
LEESBURG, FL 34788 US

New Mailing Address:

FEI Number: 59-2916971 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TESTA, LORETTA
9809 FAIRWAY CIRCLE
LEESBURG, FL 34788 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VSD () Delete
Name: RANFONE, SAM,
Address: 11131 LAKE DR
City-St-Zip: LEESBURG, FL 34788

Title: VD () Delete
Name: TESTA, LORETTA,
Address: 9809 FAIRWAY CIRCLE
City-St-Zip: LEESBURG, FL 34788

Title: VD () Delete
Name: TESTA, ALBERT,
Address: 9809 FAIRWAY CIRCLE
City-St-Zip: LEESBURG, FL 34788

Title: VTD () Delete
Name: LORE, JOHN,
Address: 1098 JUNIPER COURT
City-St-Zip: TAVARES, FL 32778

Title: SD () Delete
Name: LORE, BARTHOLOMEW,
Address: 4168 STONECHAT COURT
City-St-Zip: ROSWELL, GA 30075

Title: PD () Delete
Name: RANFONE, FRANK,
Address: 11244 FOUNTAIN LAKE BLVD
City-St-Zip: LEESBURG, FL 34788

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: SD (X) Change () Addition
Name: LORE, BARTHOLOMEW,
Address: 18 CROSSBOW COURT
City-St-Zip: PALM COAST, FL 32137

Title: PD (X) Change () Addition
Name: RANFONE, FRANK,
Address: 20746 CANOE CROSSING COURT
City-St-Zip: CLERMONT, FL 34715

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: LORETTA TESTA

VD

01/06/2009

Electronic Signature of Signing Officer or Director

_____ Date