FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000086152 (4)

LUNA IRRIGATION AND MAINTENANCE, INC.

FILED Jan 28 1997 8:00am Secretary of State



Principal Place of Business Mailing Address 2705 BRANTLEY ROAD 2705 BRANTLEY ROAD FORT PIERCE FL 34981 FORT PIERCE FL 34981-80					- mater	3. Date Incorporated or Qualified 3a. Date of Last Report			
						12/13/1993		30/1996	•
2. Principal F	Place of Business	2a. Mailing Ad	Idress		,,	4. FEI Number	1 9 1/		Applied For
21		26				65-045 1560		\rightarrow	Not Applicable
Surfe, Apt	#, etc.	Suite, Apt.	#, etc.			5. Certificate of Status Desired			5 Additional Required
City & Stat 23	le	City & Stat				6. Election Campaign Financing Trust Fund Contribution			0 May Be od to Fees
Zφ	Country	Z(p)		Country	/	8. This corporation has liability for	·		rs. 199.032,
24	25	29	30			Florida Statutes	Yes		
	9. Name and Address of Curr	ent Registered Agen	<u> </u>	81	Neces	10. Name and Address of New	registered	Agent	
	VA, LUIS			81	Name				*
2705 BRANTLEY ROAD FORT PIERCE FL 34981				82		ress (P.O. Box Number is Not Acceptable)			
1				83					
				84	City		g=+ 1	85 Z	ip Code
					L	poration submits this statement for the	<u>FL</u>		
SIGNATURE		AND DIRECTORS		13.	ent signature requ	ired when reinstating) ADDITIONS/CHANGES TO OF	DATE FICERS AN		
TOLE	PTD		DELETE 1	.1 TITLE				Chang	ge L Addition
NAME	LUNA, LUIS			2 NAME					
STREET ADDRESS					T ADDRESS				
CITY - ST - ZIP	FORT PIERCE FL 34981 VSD			4 CITY-1	ST-ZIP			Chang	e Addition
TITLE	LUNA, ROSA	LJ	1	1 TITLE	l l			C CURUS	e AQUICIUI
NAME CERCET ADDOLOG	ATAC DOLLETT BY DOLD		I 1	2 NAME	T ADDRESS				
STREET ADDRESS CITY - ST - ZIF	FORT PIERCE FL 34981			: 3 5 INEC !: 4 CITY -					
Tille				3.1 TITLE	OI-ZIF			☐ Chang	je 🔲 Additior
NAME				3.2 NAME	-			·	
STREET ADDRESS					T ADDRESS				
CHY-ST ZIP			3	3 4. CITY-	ST-ZIP				
TI'LE			DELETE 4	1.1 TITLE		(☐ Chang	ge 🔲 Addition
NAME			4	. 2 NAME					
STREET ADDRESS			4	I.3 STREE	T ADDRESS				
City-S' /IP				I.4 CITY -	ST-ZIP	_ 			
TITLE		LJ		5.1 TITLE				Chang	ge Addition
NAVE				.2 NAME	1				
STREET ADDRESS					T ADDRESS				
CITY - ST - ZIP	<u> </u>			4 CITY-	ST-ZIP			☐ Chang	ne 🔲 Addition
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NAME OTROCT ABOLESC				2 NAME	T ADDOCCO				
STREET ADDI+SS					T ADDRESS				
CITY - ST - ZIP	İ		■ €	5.4 CITY -	SI-ZIP				

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 B'ock 12 or Block 13 if changed, or on an attachment with an address.