2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2007
Secretary of State

DOCUMENT# P94000010484

Entity Name: LUNA SERVICES, INC.

Current Principal Place of Business:

1999 NE 150TH STREET
SUITE 104
NORTH MIAMI, FL 33181

New Principal Place of Business:

Current Mailing Address:

1999 NE 150TH STREET
SUITE 104
NORTH MIAMI, FL 33181

New Mailing Address:

FEI Number: 65-0467953 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FARACHE, AHRON
1999 NE 150TH STREET
SUITE 104
NORTH MIAMI, FL 33181 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: SD ( ) Delete
Name: FARACHE, AHRON
Address: 21205 YACHT CLUB DRIVE, APT 3204
City-St-Zip: AVENTURA, FL 33180 US

Title: S ( ) Delete
Name: FARACHE, LINA
Address: 16294 VIA VANITIA W
City-St-Zip: DELRAY BEACH, FL 33484 US

Title: P (X) Delete
Name: FARACHE, MONICA
Address: 21205 YACHT CLUB DRIVE, #3204
City-St-Zip: AVENTURA, FL 33180 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: FARACHE, AHRON
Address: 21205 YACHT CLUB DRIVE, APT 3204
City-St-Zip: AVENTURA, FL 33180 US

Title: VP (X) Change ( ) Addition
Name: FARACHE, LINA
Address: 16294 VIA VANITIA W
City-St-Zip: DELRAY BEACH, FL 33484 US

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

I hereby certify that the information supplied with this filing does not qualify for the 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: AHRON FARACHE P 04/12/2007

Electronic Signature of Signing Officer or Director — Date