

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000065794

FILED  
Jan 15, 2009  
Secretary of State

Entity Name: LUIS MONTOYA SCULPTURE STUDIO, INCORPORATED

## Current Principal Place of Business:

4110 GEORGIA AVE.  
WEST PALM BEACH, FL 33405

## New Principal Place of Business:

4110 GEORGIA AVE.  
WEST PALM BEACH, FL 33405 US

## Current Mailing Address:

4110 GEORGIA AVE.  
WEST PALM BEACH, FL 33405

## New Mailing Address:

4110 GEORGIA AVE.  
WEST PALM BEACH, FL 33405 US

FEI Number: 65-0515203

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

METT, SYLVIA J  
2501-B PRESIDENTIAL WAY  
WEST PALM BEACH, FL 33401 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: P ( ) Delete  
Name: LUIS FERNANDEZ,  
Address: 11579 41ST CT NO.  
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: S ( ) Delete  
Name: ORTIZ, LESILE  
Address: 1305 NORTH L ST  
City-St-Zip: LAKE WORTH, FL 33460

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: LUIS FERNANDEZ,  
Address: 11579 41ST CT NO.  
City-St-Zip: ROYAL PALM BEACH, FL 33411 US

Title: S (X) Change ( ) Addition  
Name: ORTIZ, LESILE  
Address: 1305 NORTH L ST  
City-St-Zip: LAKE WORTH, FL 33460 US

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: LESLIE ORTIZ

S

01/15/2009

Electronic Signature of Signing Officer or Director

Date