1-22-97 B-0464 C 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 # P94000070591 (0)

LUNA BILLING COMPANY, INC.

Principal Place of Business

Mailing Address

10020 S.W. 33RD STREET MIAMI FL 33165 10020 S.W. 33RD STREET MIAMI FL 33165-3821

FILED Jan 22 1997 8:00am Secretary of State



MIAMI PL 33165		MIMM) TL 30103-3021					
					3. Date Incorporated or Qualified 09/26/1994	3a. Date of Last 04/04/1996	
2. Principal Place 21 955 - A	SW 87AUE	28. Mailing Address 26 955-A SU	287	906	4. FEI Number 65-0574344		Applied For Not Applicable
Suite, Apt. #, etc Suite, Apt. #, etc. 22 27					5. Certificate of Status Desired		Additional Required
City & State City & State 23 HiAMi , FL 28 MiAMi			FL		Election Campaign Financing Trust Fund Contribution		0 May Be d to Fees
Zip 24 33/74	Country 25	29 33 /74	Count 30	у	8. This corporation has liability for in Florida Statutes	ntangible tax under	r s. 199.032,
	Name and Address of Curren	Registered Agent			10. Name and Address of New Reg	istered Agent	
GONZALEZ, MIRIAM M				81 Name			
10020 S.W. 33RD STREET MIAMI FL 33165			8	82 Street Address (P.O. Box Number is Not Acceptable)			
••••			8	3			
			8	4 City		FL 85 Zi	ip Code
SIGNATURE	stered agent, or both, in the State amiliar with, and accept the obligations of ages and ages and ages.				coration submits this statement for the pricion's board of directors. I hereby acception are the properties of the prope	DATE	as registered
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECT	ORS IN 12
STREET ADDRESS 1) Gonzalez, Miriam M 10020 S.W. 33RD Street Mami Fl 33165	☐ DELETE	1.1 TITLE 1.2 NAMI 1.3 STRE 1.4 CITY	ET AODRESS		Chang	e L Addition
TITLE NAME STREET ADDRESS		DELETE	2.1 TITLE 2.2 NAM 2.3 STRE	ET ADDRESS		Chang	ge 🔲 Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS		☐ DELETE	3.1 TIFLE 3.2 NAM 3.3 STRE	E ET ADDRESS		Chang	ge Addition
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C(TY+ST-7IP TITLE NAME		☐ DELETE	5.1 TITLE 5.2 NAM	E		☐ Chang	ge Addition
STREET ADDRESS CITY - ST - ZIP TITLE NAME		☐ DELETE	5 4 CITY 6 1 TITLE 6 2 NAM			Chang	ge Additio
STREET ADDRESS CITY-ST-7P			1	ET ADDRESS			

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 Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: MIRING OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

1-13-97

(305)265-4377