

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**May 06, 2005 8:00 am**  
**Secretary of State**

05-06-2005 90108 033 \*\*\*150.00

**DOCUMENT # P95000029854**

1. Entity Name

L'ELECTRICFIL U.S.A., INC.



Principal Place of Business

1110 BRICKELL AVE., #820  
MIAMI FL 33131

Mailing Address

1110 BRICKELL AVE., #820  
MIAMI FL 33131

**50050683**



1st MOORE

CR2E034 (10/04)

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

65-0661971

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

CRUZ, AMAURY ESQ.  
3001 S.W. THIRD AVENUE  
MIAMI FL 33129

7. Name and Address of New Registered Agent

Name **JEAN L. LABRADA**

Street Address (P. O. Box Number is Not Acceptable)

**1110 Brickell Ave. #820**

City **Miami**

**FL**

Zip Code **33131**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

**JEAN L. LABRADA**

**04-27-05**

(Signature, typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2005 Fee Will Be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D/P ☒ Delete  
NAME LUCIUS, HORACIO E  
STREET ADDRESS 1110 BRICKELL AVE. #820  
CITY-ST-ZIP MIAMI FL 33131

TITLE VTD ☐ Delete  
NAME LUCIUS, MIGUEL A  
STREET ADDRESS 1110 BRICKELL AVE. #820  
CITY-ST-ZIP MIAMI FL 33131

TITLE DS ☐ Delete  
NAME LUCIUS, DIEGO R  
STREET ADDRESS 1110 BRICKELL AVE. #820  
CITY-ST-ZIP MIAMI FL 33131

TITLE S ☐ Delete  
NAME SBERT, JEAN L  
STREET ADDRESS 1110 BRICKELL AVE., #820  
CITY-ST-ZIP MIAMI FL 33131

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D/P/T ☒ Change ☐ Addition  
NAME Miguel A. Lucius  
STREET ADDRESS 1110 Brickell Ave. #820  
CITY-ST-ZIP Miami, FL. 33131

TITLE D/V/S ☒ Change ☐ Addition  
NAME Diego R. Lucius  
STREET ADDRESS 1110 Brickell Ave. #820  
CITY-ST-ZIP Miami, FL. 33131

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**JEAN L. SBERT**

**04-27-05**

**305-379-0114**

(Signature and typed or printed name of signing officer or director)

Date

Daytime Phone #