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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P95000052428 (6)

LUNA INVESTMENTS CORP.

FILED Jan 23 1998 8:00am Secretary of State



	·					
Principal Place of Business Mailing Address					E TRANSILLAN LINE SPENS BUSEN BODIN MAINT DRYSS ANDRY BILLO SIDIN MINING STARD) THAN 1881	
7273 NW 12 ST.						
MIAMI FL 33126 MIAMI FL 33126						DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
						07/07/1995
	Place of Business		2a. Mailing Address			4. FEI Number Applied For
Suite, Apt.	# elc	26 Suite Apt # oto	Suite, Apt. #, etc.			65-0651396 Not Applicable
22		27	27			5. Certificate of Status Desired S8.75 Additional Fee Required
City & Stat	te	City & State				6. Election Campaign Financing \$5.00 May Be
Zip Country		Zip Country			Trust Fund Contribution	
24 25 29		<u> </u>	Zip Country			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
24	9. Name and Address of Current Registered Agent		<u>-</u>		Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent	
1	ORENZO, LISETEE C			81	Name	
6241 S.W. 30TH STREET					Street Add	dress (P.O. Box Number is Not Acceptable)
MIAMI FL 33155			83			
				84	City	85 Zip Code
					•	FL '
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE						
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE						
12.		ND DIRECTORS	13			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PSTD Lorenzo, Lisette C	☐ DELETE		TITLE		☐ Change ☐ Addition
NAME	6241 S.W.30TH STREET			NAME		
STREET ADDRESS CITY-ST-ZIP	MIAMI FL 33155				ADORESS	
TITLE	TRAMITE GO 100	☐ DELETE		CITY-S' Title	1- ZIP	☐ Change ☐ Addition
NAME				NAMÉ		Change E Addition
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP			2,4C			
TITLE				TITLE		☐ Change ☐ Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3	STREET.	ADDRESS	
CITY-ST-ZIP			3.4. CITY-ST-ZIP			
TITLE			TITLE		☐ Change ☐ Addition	
NAME			4. 2	NAME		
STREET ADDRESS			4.3 9	STREET	ADDRES\$	
CITY-ST-ZIP			CITY-SI	- ZIP		
TITLE			TITLE		☐ Change ☐ Addition	
NAME			5.21	NAME	Ī	
STREET ADDRESS			5.3 8	STREET	ADDRESS	
CITY-SI-ZIP			5.4 (CITY-ST	- ZIP	
TITLE			5.17	5.1 TITLE		☐ Change ☐ Addition
NAME	wie /		6.21	6.2 NAME		
STREET ADDRESS	/	` ^	6.3 5	STREET A	ADDRESS	
CITY-ST-ZIP		\mathcal{L}	6.4 (CITY-ST	- ZIP	
14. I hereby certify that the information supplied in this hing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information						

report is true and accurate and that my signature shall have the same legal effect as if further certify that the information report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an ustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in the an address.

SIGNATURE:

12/98

(305) 418 -4444