

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000004669

1. Corporation Name
LOS LUCUS INC.

Principal Place of Business
5770 S.W. 5TH TERRACE
MIAMI FL 33144

Mailing Address
5770 S.W. 5TH TERRACE
MIAMI FL 33144

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip Country

28

Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

GOMEZ, MARITZA
5770 S.W. 5TH TERRACE
MIAMI FL 33144

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

Ramon V. Menendez RAMON V. MENENDEZ MAR 08/99

12. OFFICERS AND DIRECTORS

TITLE D
NAME GOMEZ, MARITZA
STREET ADDRESS 21 E. 81ST ST.
CITY-ST-ZIP HIALEAH FL 33010

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 in duplicate, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 687, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Ramon V. Menendez RAMON V. MENENDEZ MAR 08/99 305-778-9500

FILED

99 MAR 22 PM 3:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

3. Date of Incorporation or Qualification

01/15/1998

4. FEE Number

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax

[] Yes [] No

10. Name and Address of New Registered Agent

81 Name Ramon V. Menendez
82 Street Address (P.O. Box Number is Not Acceptable)
5770 SW 5 TERR
83
84 City Miami FL 85 Zip Code 33144

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP
15 TITLE
16 NAME
17 STREET ADDRESS
18 CITY-ST-ZIP
19 TITLE
20 NAME
21 STREET ADDRESS
22 CITY-ST-ZIP
23 TITLE
24 NAME
25 STREET ADDRESS
26 CITY-ST-ZIP
27 TITLE
28 NAME
29 STREET ADDRESS
30 CITY-ST-ZIP

DIRECTOR
RAMON V. MENENDEZ
5770 SW 5 TERR
MIAMI FL 33144

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****150.00 ****150.00

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