## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P98000048099				
Entity Name LUMINAIRE STUDIO, INC.				2008 HART 19 PH- 4-1'5
Principal Place of Business 8950 N.W. 33RD STREET MIAMI, FL 33172		Mailing Address 8950 N.W. 33RD STREET MIAMI, FL 33172		SECRETARY OF STATE TALLAHASSEE, FLORIDA
				)
DO-NOT-WRITE IN-THIS SPAC				01252008 No Chg-P CR2E034 (11/05)  4. FEI Number - Applied For -
				65-0950649 Not Applicable
	6. Name and Address of Current Re	gistered Agent	•	5. Certificate of Status Desired Fee Required
KASSAMALI, NASIR				DO NOT WRITE
8950 N.W. 33RD STREET MIAMI, FL 33172				IN THIS SPACE
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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				
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE  Output  Date				
FILE NOW!!! FEE IS \$150.00  After-May-1,-2008 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.   Added to Fees				
10.	OFFICERS AND DI	RECTORS		
TITLE .	PD			
NAME STREET ADDRESS	KASSAMALI, NASIR 8950 N.W. 33RD STREET			500120780315 03/20/0801004014 **800.00
CITY-ST-ZIP	MIAMI, FL 33172			03, 23, 00 0130, 01, 44,000,00
TITLE	VP	<u></u>	•	
NAME	KASSAMALI, NARGIS		•	
STREET ADDRESS CITY-ST-ZIP	8950 N.W. 33RD STREET MIAMI, FL 33172		•	
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NAME / STREET ADDRESS			* :	
CITY-ST-ZIP	-		and and an arms are a significant	
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: