FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000087444

1. Entity Name

Luminer Corp.

FILED

02 JAN -8 PM 12:12

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
7430 SW 41 St	same
Suite, Apt. #, etc. Ste 101	Suite, Apt. #, etc.
City & State MIAMI FL	City & State
Zip 33155 Country USA	Zip Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 650952026 — Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

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7. Name and Address of Current Registered Agent

Name Michael Burner

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

11040 SW 36 St

City MIAMI FL Zip Code 33165

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.

SIGNATURE x Michael Burner 01/07/02

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President LOURDES BURNER 11040 SW 36 St MIAMI FL 33165
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treasurer Michael Burner 11040 SW 36 St MIAMI FL 33165
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****150.00 ****150.00

DO NOT WRITE IN THIS SPACE

13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: Michael Burner 01/07/02 (305) 260-0380