

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S44488

FILED
Apr 08, 2006
Secretary of State

Entity Name: LIVING IN THE LIGHT, INC.

Current Principal Place of Business:

17555 ATLANTIC BLVD
SUITE 1102
SUNNY ISLES BEACH, FL 33160

New Principal Place of Business:

Current Mailing Address:

17555 ATLANTIC BLVD
SUITE 1102
SUNNY ISLES BEACH, FL 33160

New Mailing Address:

FEI Number: 65-0253149

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOPEZ, LUZ MARIA
17555 ATLANTIC BLVD
SUITE 1102
SUNNY ISLES BEACH, FL 33160 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LOPEZ, LUZ M
Address: 17555 ATLANTIC BLVD SUITE 1102
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: VM () Delete
Name: HINCAPIE, ALMA
Address: 7135 HARDING AVE #106
City-St-Zip: MIAMI BEACH, FL 33141

Title: SC () Delete
Name: HINCAPIE, NELSON
Address: 2351 SOUTH DOUGLAS RD. PH 9
City-St-Zip: MIAMI, FL 33145

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VM (X) Change () Addition
Name: HINCAPIE, ALMA
Address: 16950 NORTH BAY ROAD APT 1512
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALMA HINCAPIE

VM

04/08/2006

Electronic Signature of Signing Officer or Director

Date