

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 # S99428

(2)

1. Corporation Name

LUFA CORPORATION

Principal Place of Business

401 BISCAYNE BLVD. #S-137  
MIAMI FL 33132

Mailing Address

1423 WASHINGTON AVENUE  
MIAMI BEACH FL 33139  
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt. #, etc

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc

27 City & State

28 Zip Country

29

3. Date Incorporated or Qualified

12/11/1991

4. FEI Number

65-0300488

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

PEREZ, JOAO RAMON  
1423 WASHINGTON AVENUE  
MIAMI BEACH FL 33139

10. Name and Address of New Registered Agent

81 Name PEREZ, JAYME

82 Street Address (P.O. Box Number is Not Acceptable)  
1423 WASHINGTON AVENUE

83

84 City MIAMI BEACH

FL

85 Zip Code 33139

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 of person providing notice of change of agent and place of business

(NOTE: Registered Agent signature required when constituting)

DATE

5/25/98

12. OFFICERS AND DIRECTORS

TITLE P  
NAME PEREZ, JOAO RAMON  
STREET ADDRESS 1423 WASHINGTON AVE  
CITY-ST-ZIP MIAMI BEACH FL  
☒ DELETE

TITLE VP  
NAME PEREZ JAYME  
STREET ADDRESS 1423 WASHINGTON AVE.  
CITY-ST-ZIP MIAMI BEACH FL  
☒ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P  
1.2 NAME PEREZ, JAYME  
1.3 STREET ADDRESS 1423 WASHINGTON AVENUE  
1.4 CITY-ST-ZIP MIAMI BEACH FL 33139  
☒ Change ☐ Addition

2.1 TITLE VPS  
2.2 NAME PEREZ, JOAO R.  
2.3 STREET ADDRESS 1423 WASHINGTON AVENUE  
2.4 CITY-ST-ZIP MIAMI BEACH FL 33139  
☒ Change ☐ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
☐ Change ☐ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
☐ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP  
☐ Change ☐ Addition

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*[Signature]*

04/24/98

CR2E034 (10/97)