2004 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # V69031

1. Entity Name

LLUVIA INCORPORATED



FILED Jan 23, 2004 08:00 AM Secretary of State

Principal Place of Business

6822- 22 ND AVE N

149

ST. PETE, FL 33710 US

Mailing Address

6822-22ND AVE N

ST PETE, FL 33710 US



01202004

No Chg-P

CR2E034 (10/03)

4. FEI Number 59-3159890

Applied For Not Applicable

5. Certificate of Status Desired

□ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PAGE, GEORGE 3335 66TH WAY NORTH ST. PETERSBURG, FL 33710

SIGNATURE:

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8. The above the obligat	named entity submits this statement for the plants of registered agent.	·			r with, and accept
SIGNATURE	Signature, typed or printed name of positioned agent and little		TEOTAE Page d Agent signature getilted when reinstaffind	1/30/0°	<u> </u>
	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	9. Election Campaign Finar Trust Fund Contribution,			
10.	OFFICERS AND DIREC	CTORS	:		
TITLE NAME STREET ADDRESS CITY+ST-ZIP	VP PAGE, GEORGE 3335 66TH WY N ST PETE, FL 33710			U00000011488 01/23/04-80039-016	150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SAOWANEE, PAGE 3335 66TH WY N ST PETERSBURG, FL 33710				
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN .	THIS SPACE	
TITLE NAME STREET ADDRESS GITY-ST-ZIP			·	•	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. 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 10 or Block 11 if changed, or on an attachoren with an address, with all other like empowered.					