

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000095495

**Entity Name:** LUCA SALES SERVICE, INC.

**Current Principal Place of Business:**

3500 MYSTIC POINTE DR  
1104  
AVENTURA, FL 33180

**Current Mailing Address:**

3500 MYSTIC POINTE DR  
1104  
AVENTURA, FL 33180

**FEI Number:** 02-0704811

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

KIPERSHMIT, CARLOS A  
3500 MYSTIC POINTE DR  
1104  
AVENTURA, FL 33180 US

*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

**Officer/Director Detail :**

Title PD  
Name KIPERSHMIT, CARLOS A  
Address 3500 MYSTIC POINTE DR #1104  
City-State-Zip: AVENTURA FL 33180

Title VD  
Name KIPERSHMIT, NORMA B  
Address 3500 MYSTIC POINTE DR #1104  
City-State-Zip: AVENTURA FL 33180

*I hereby 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 all other like empowered.*

**SIGNATURE:** CARLOS KIPERSHMIT

**PRESIDENT**

**01/16/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date