


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Sep 02, 2008 8:00 am**  
**Secretary of State**

09-02-2008 90030 049 \*\*\*150.00

<b>DOCUMENT # 213012</b>	
1. Entity Name <b>FRATERNITY HOUSE, INC.</b>	

Principal Place of Business <b>250 MERIDIAN AVENUE #5 APT. 5 MIAMI BEACH FL 33139</b>	Mailing Address <b>250 MERIDIAN AVENUE #5 APT. 5 MIAMI BEACH FL 33139</b>
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2. Principal Place of Business - No P.O. Box # <b>250 MERIDIAN AV.</b>	3. Mailing Address <b>250 MERIDIAN AV.</b>
Suite, Apt. #, etc. <b>APT 5</b>	Suite, Apt. #, etc. <b>APT 5</b>
City & State <b>MIAMI BEACH FL.</b>	City & State <b>MIAMI BEACH FL.</b>
Zip <b>33139</b>	Country <b>FLORIDA</b>

2nd MOORE CR2E034 (4/08)

4. FEI Number <b>59-6064850</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent <b>LARA, JOSE 250 MERIDIAN AVE. MIAMI BEACH FL 33139</b>	
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code	

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Jose Lara* (NOTE: Registered Agent signature required when reappointing) DATE

<b>FILE NOW!!! FEE IS \$550.00 DUE BY September 3, 2008 Make Check Payable to Florida Department of State</b>	S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is \$150.00. <input checked="" type="checkbox"/>	9. Election Campaign Financing Trust Fund Contribution: <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T LARA, JOSE 250 MERIDIAN AVE MIAMI BCH. FL</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S NICHOLSON, JOSEPH 250 MERIDIAN AVE., APT. 4 MIAMI BEACH FL 33139</b> <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S Decker, Mark 250 Meridian Ave., Apt. 9 Miami Beach, FL 33139</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P WINGATE, DOUG 250 MERIDIAN AVE APT 6 MIAMI BEACH FL 33139</b> <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P Duff, Martyn 250 Meridian Ave. #7 Miami Beach FL 33139</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP FREEMAN, SAM 250 MERIDIAN AVE APT 3 MIAMI BEACH FL 33139</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 attachment with an address with all other like empowered.

SIGNATURE *Jose Lara* (TREAS) 01/02/09 0155345331