2007 FOR PROFIT CORPORATION **ANNUAL, REPORT** 

## Apr 30, 2007 8:00 am Secretary of State **DOCUMENT # 426061** 04-30-2007 90862 009 \*\*\*150.00 1. Entity Name MANVAL ELECTRIC & HARDWARE CORPORATION Principal Place of Business Mailing Address 8365 SW 78 ST 8365 SW 78 ST 60045968 MIAMI, FL 33143-833 US MIAMI, FL 33143-833 US No Chg-P CR2E034 (11/05) 04052007 DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-1205329 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LOPEZ, MANUEL DO NOT WRITE 8365 S.W. 78TH ST. MIAMI, FL 33143 IN THIS SPACE 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. Sinnature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Apent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS TITLE LOPEZ, MANUEL NAME STREET ADDRESS 8365 S.W. 78TH ST. CITY-ST-ZIP MIAMI, FL TITLE NAME LOPEZ, YOLIANNE 8365 SW 78 ST STREET ADDRESS CITY-ST-ZIP MIAMI, FL TITLE LOPEZ, YOLANDA 8365 SW 78 ST STREET ADDRESS DO NOT WRITE CITY-ST-ZIP MIAMI, FL IN THIS SPACE TITLE NAME STREET ADDRESS CITY-SY-ZIP

12. I hereby certify that the information supplied with this filling 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:

TITLE NAME STREET ADDRESS CITY-\$T-ZIP

NAME STREET ADDRESS CITY-ST-ZIP

> PREGIDENT RINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED