



**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 28, 2008 08:00 AM**  
**Secretary of State**

DOCUMENT # 513484 1. Entity Name MR. WINTER, INC.	
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Principal Place of Business 8080 WEST 26TH COURT HIALEAH, FL 33016	Mailing Address 8080 WEST 26TH COURT HIALEAH, FL 33016
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**DO NOT WRITE IN THIS SPACE**

	
03122008 No Chg-P CR2E034 (11/05)	
4. FEI Number 59-1696560	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

LAYNE, PAUL JON ESQ.  
 1792 BELL TOWER LANE  
 FORT LAUDERDALE, FL 33326

**DO NOT WRITE 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 \_\_\_\_\_ (NOTE Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

U00000925003  
 05/20/08-80009-011 158.75

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PST MIJARES, MANUEL 8080 WEST 26TH COURT HIALEAH, FL 33016
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V LAYNE, DAVID 8080 WEST 26TH COURT HIALEAH, FL 33016
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE IN THIS SPACE**

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:  **MANUEL MIJARES** 4/21/08 (305) 556-6741

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #