2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

FILED Apr 12, 2007 8:00 am Secretary of State

NOT APPLICABLE Not. Zip Country Zip Country 5. Certificate of Status Desired \$8.75 Addithout Fee Required 6. Name and Address of Current Registered Agent Name ERNESTO MARTINEZ Street 300 S.W. 107TH AVE STE 312 MIAM!, FL 33174 City Miami FL Zip Code 3317 City Miami FL Zip Code 3317 Signature, typed or printed pane of registered agent, and little if applicable. INOTE: Registered Agent signature required when reinstating) Make check payable to	DOCUI 1. Entity Name THE 300 I) .				04-12-20	007 90034	4 036 ****6	01.25		
Suite, Apt. #, etc. Suite, Apt. #, etc.	300 SW 107	avenue	400 SW 107 AVENUE 312								
City & State City & State City & State City & State Country C	2. Principal Pl	ace of Business - No P.O. Box #	3. Mailing Address								
Supplementary Supplementar	Suite, Apt. #, etc.		Suite, Apt. #, etc.				03292007	Chg-NP	CR2E	E037 (12/06)	
6. Name and Address of Current Registered Agent Name Registered Agent Registered A	City & State		City & State			4. FEI Numbe NOT AF	PPLICABLE		⊢	oplied For ot Applicable	
MEDRANO, PEDRO PEREZ 300 S.W. 107TH AVE STEE 312 MIAMI, FL 33174 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, a the obligations of registered agent. SIGNATURE Filling Fee is \$61.25 Due by May 1, 2007 Pilling Fee is \$61.25 Division Financing Pilling Fee is \$61.25 Division Financing Pilling Fee is \$61.25 Pilling Fee is \$61.25 Division Financing Pilling Fee is \$61.25 Division Financing Pilling Fee is \$61.25 Pi	Zip	Country	Žip	Zip Cou			5. Certificate of Status Desired \$8.75 Additional Fee Required				
Street 35/09's (P.W. Born Bythous Acceptable) 210 Street 35/09's (P.W. Born Bythous Acceptable) 210 Street 35/09's (P		6. Name and Address of Current	Registered Agent						w Registere	ed Agent	
SIGNATURE Supreme species agent Signature species agent Signat	·				Name ERNESTO MARTINEZ						
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 termiliar with, at the obligations of registered agent. SIGNATURE Filing Fee is \$61.25 Due by May 1, 2007 Trust Fund Contribution. OFFICERS AND DIRECTORS III. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS III. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS III. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS III. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS III. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS III. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS III. BY DEAL STREET ADDRESS OF STREET A	STE 312				390° Sw 1070° Avenue, # 210						
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, at the obligations of registered agent. Comparison of the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, at the obligations of registered agent. Comparison of the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, at the obligations of registered agent, or both, in the State of Florida. I am familiar with, at the obligations of registered agent, or both, in the State of Florida. I am familiar with, at the obligations of registered agent, or both, in the State of Florida. I am familiar with, at the obligations of registered agent, or both, in the State of Florida. I am familiar with, at the obligations of registered agent, or both, in the State of Florida. I am familiar with, at the obligations of registered agent, or both, in the State of Florida. I am familiar with, at the obligations of registered agent, or both, in the State of Florida. I am familiar with, at the obligations of registered agent, or both, in the State of Florida. I am familiar with, at the obligation of registered agent, or both, in the State of Florida. I am familiar with, at the obligation of the purpose of seasons produced agent and solved agent. Comparison of registered agent. Comparison of the purpose of the season separation of the purpose of the purpose of the purpose of the separation of the purpose of th	WIIAWI, FL 33174				City Miami FL Zip Code 33174						
Trust Fund Contribution.	the obligati	ions of registered agent.	acting		ed offic e o r	registere	ed agent, or bo	th, in the State of	_4	19/2	
TITLE					-						
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NAME	NAME STREET ADDRESS	ALVAREZ, JESUS 300 SW 107 AVENUE	XX Delete	NAME STREE	et address	300	SW 107	' Avenue	e, #20		Addition
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NAME NAME	NAME STREET ADDRESS		☐ Delete	NAME STREE	E Et address					☐ Change	Addition
CITY-ST-ZIP CITY-ST-ZIP	NAME STREET ADDRESS		☐ Delete	NAME STREE	et adoress					Change	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 617, 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 AND TYPED OFFRINTED NAME OF SIGNANG OFFICER OR DIRECTOR