


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 22, 2008 8:00 am
Secretary of State

05-22-2008 90021 021 ***150.00

DOCUMENT # P03000108833 1. Entity Name LAFISE TRADE CORP.	
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Principal Place of Business 200 SOUTH BISCAYNE BOULEVARD SUITE 3750 3550 MIAMI, FL 33131	Mailing Address 200 SOUTH BISCAYNE BOULEVARD SUITE 3750 3550 MIAMI, FL 33131
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60043530



04302008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 06-1710255	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ZAMORA, ROBERTO JR.
200 SOUTH BISCAYNE BOULEVARD
SUITE ~~3750~~ **3550**
MIAMI, FL 33131

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ZAMORA, ROBERTO JR. 200 SOUTH BISCAYNE BLVD., SUITE 3750 3550 MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD ZAMORA, MARIA J 200 SOUTH BISCAYNE BLVD., SUITE 3750 3550 MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ZAMORA, ROBERTO J SR. 200 SOUTH BISCAYNE BLVD., SUITE 3750 3550 MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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: *Robert Zamora* Date: 4-30-08 Daytime Phone #: 305-774-6001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR