2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

CITY-ST-ZIP

12. I hereby certify that the info indicated on this report or of the oprporation or theye change to or on an attac

SIGNATURE:

Apr 24, 2006 8:00 am Secretary of State **DOCUMENT # P04000084827** 04-24-2006 90442 029 ***150.00 1. Entity Name SEVE ENT, CORP Mailing Address Principal Place of Business 14874 SW 173 TERR 14874 SW 173 TERR 50016146 MIAMI, FL 33187 MIAMI, FL 33187 US CR2E034 (11/05) 04212006 No Chg-P DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-1179458 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE RAMOS, CARMEN 14874 SW 173 TERR MIAMI, FL 33187 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. Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. **PVST** TITLE RAMOS, CARLOS SR NAME STREET ADDRESS 14874 SW 173 TERR CITY-ST-ZIP MIAMI, FL 33187 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TM F IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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his filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information the and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director yed to execute this peport as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

FILED