2008 FOR PROFIT CORPORATION

May 01. 2008 08:00 AN ate

| ANNUAL REPORT | | | | Wiay U1, ZUUO UO:U | | | |
|---|--|---|--|--|---------------------------|--------------------------------------|--|
| 1. Entity Nam | MENT # P040001686. | 28 | | | Secretary of Sta | | |
| 12900 SW 89TH COURT 1290 | | Mailing Address 12900 SW 89TH COURT MIAMI, FL 33176 | 900 SW 89TH COURT | | | | |
| D | O NOT WRITE I | CE | 01282008 No Chg-P CR2E034 (11/05) 4. FEI Number | | | | |
| 201 ALHA | 6. Name and Address of Current Reg ONE, RONALD R MBRA CIRCLE SUITE 601 ABLES, FL 33134 | | | NOT W | | | |
| 8. The above the obligat | named entity submits this statement for the ions of registered agent. Signature, typed or printed name of registered agent and to | | ed office or registe | | oth, in the State of Flor | rida. I am familiar with, and accept | |
| FILE NOWIII FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 | | | | 00 May Be U00000939534 05/28/08-80031-024 150.00 | | | |
| 10. HITLE NAME STREET ADDRESS CITY-ST-ZIP HITLE NAME STREET ADDRESS CITY-ST-ZIP HITLE NAME | OFFICERS AND DIR MGRM GARCIA, ROLAND JR 12900 SW 89TH COURT MIAMI, FL 33176 | ECTORS | | , ; | | | |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | DO NOT WRITE IN THIS SPACE | | | |
| TITLE NAME STREET ADDRESS | | | | | | | |

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 of 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 yet an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP

> formo GARCIA SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

305.234 3815 Daytime Phone #