2008 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

Feb 28, 2008 8:00 am Secretary of State DOCUMENT # P06000021613 1. Entity Name 02-28-2008 90001 048 ***150.00 COLONY MAINTENANCE SERVICE INC. Principal Place of Business Mailing Address 3006 N.W. 79 AVE 10763 N.W. 83 ST SUITE #10 MIAMI FL 33122 UNIT #5 MIAMI FL 33178 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 9607 nw Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/07) City & State City & State 4. FEI Number Applied For 20-4410326 liami Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent GARCIA, LUIS H Street Address (P.O. Box Number is Not Acceptable) 10763 N.W. 83 ST UNIT #5 **MIAMI FL 33178** 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 Fforida. I am familiar the obligations of registered agent. Daniel MRANO and stereo nuert and the Hampicable FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2008 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS PRESIDENT TITLE TITLE Change . De!ete Addition BEIARANO GARCIA, LUIS H Daniel NAME NAME 5+. #40 STREET ADDRESS 10763 N.W. 83 ST UNIT #5 STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33178** CITY-ST-ZIP VΡ TITLE Derete TITLE Change Addition HERRERA, CARLOS Nicolas Ortega 8968 Wat Flager St #4 NAME 10887 N.W. 78 TERRACE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL 33178 CITY-ST-ZIP IIIL8 ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition MAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE TITLE ☐ Delete Change ■ Addition MAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-78 TITLE Deiele Change Addition NAME STREET ADDRESS STREET ADDRESS OITY-ST-ZIP CITY-ST-ZIF 12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Section 119. Florida Statutes, I further certify that the information indicated on this report or suppliemental 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.

FILED

aniel Beinrano-Pdt. 2-15-08 305-213