


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2008 08:00 AM
Secretary of State

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| DOCUMENT # P06000135628 1. Entity Name CITY PANORAMA, INC. |  |
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| Principal Place of Business 1581 BRICKELL AVENUE 104 MIAMI, FL 33129 US | Mailing Address 1581 BRICKELL AVENUE 104 MIAMI, FL 33129 US |
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DO NOT WRITE IN THIS SPACE



04252008 No Chg-P CR2E034 (11/05)

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|---|---------------------------------------|
| 4. FEI Number 20-5792320 | 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

CEBALLOS, HAYDEE CPA
 354 SEVILLA AVENUE
 CORAL GABLES, FL 33134

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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

U00000942952
 05/29/08 00041 003 150.75

| 10. OFFICERS AND DIRECTORS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | P ROCHA, GUILLERMO 1581 BRICKELL AVENUE #104 MIAMI, FL 33129 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | S DIAGO DE ROCHA, MARTHA 1581 BRICKELL AVENUE #104 MIAMI, FL 33129 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
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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: Guillermo Rocha **Guillermo Rocha** 4/29/08 3058579069
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
 PREGS.