

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 18, 2008 8:00 am
Secretary of State

06-18-2008 90001 032 ***150.00

DOCUMENT # P07000011862 1. Entity Name MARGO INTERNATIONAL INVESTMENTS, INC.																										
Principal Place of Business WILLIAM H. ALBORNOZ, P.A. 901 PONCE DE LEON BLVD STE 603 CORAL GABLES, FL 33134			Mailing Address WILLIAM H. ALBORNOZ, P.A. 901 PONCE DE LEON BLVD STE 603 CORAL GABLES, FL 33134																							
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. City & State Zip Country		3. Mailing Address Suite, Apt. #, etc. City & State Zip Country																								
4. FEI Number 02122008 Chg-P CRZE034 (12/06)				☒ Applied For ☐ Not Applicable																						
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				6. Name and Address of Current Registered Agent WILLIAM H. ALBORNOZ, P.A. 901 PONCE DE LEON BLVD STE 603 CORAL GABLES, FL 33134																						
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code				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. (NOTE: Registered Agent signature required when resigning) DATE																						
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 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 60%;">NAME</td> <td style="width: 30%;">Delete ☐</td> </tr> <tr> <td>STREET ADDRESS</td> <td>VILLAR, GENARO</td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td>901 PONCE DE LEON BLVD STE 603</td> <td></td> </tr> <tr> <td></td> <td>CORAL GABLES, FL 33134</td> <td></td> </tr> </table>			TITLE	NAME	Delete ☐	STREET ADDRESS	VILLAR, GENARO		CITY- ST- ZIP	901 PONCE DE LEON BLVD STE 603			CORAL GABLES, FL 33134		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 60%;">NAME</td> <td style="width: 30%;">Change ☐ Addition ☐</td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td></td> <td></td> </tr> </table>			TITLE	NAME	Change ☐ Addition ☐	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: GENARO VILLAR 04/25/08 305-444-1741
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER, DIRECTOR, DATE DAYTIME PHONE #