## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P99000006710

Entity Name: BIMER CORP.

FILED Feb 29, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

1420 BRICKELL BAY DRIVE #1503 MIAMI, FL 33131

**Current Mailing Address: New Mailing Address:** 

7950 W. FLAGLER ST., 9040 S W 78 CT SUITE 107 MIAMI, FL 33156 US MIAMI, FL 33144

FEI Number: 02-0577819 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DE LOS SANTOS, DORA I DE LOS SANTOS, DORA I 7950 W. FLAGLER ST., 9040 SW 78 CT, SUITE 107 US MIAMI, FL 33156 MIAMI, FL 33144 US

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.

SIGNATURE: DORA DE LOS SANTOS 02/29/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition

Name: WATED, ELIAS Name: WATED, ELIAS

1420 BRICKELL BAY DRIVE, NO. 1503 1420 BRICKELL BAY DRIVE, NO. 1503 Address: Address:

City-St-Zip: MIAMI, FL 33131 City-St-Zip: MIAMI, FL 33131 US

DPT Title: DPT Title: () Delete (X) Change ( ) Addition Name: WATED, ELIAS Name: WATED, ELIAS

1420 BRICKELL BAY DRIVE, NO. 1503 1420 BRICKELL BAY DRIVE, NO. 1503 Address: Address:

MIAMI, FL 33131 US City-St-Zip: MIAMI, FL 33131 City-St-Zip:

( ) Delete Title: (X) Change ( ) Addition Title: DSVP DSVP

WATED, BEATRIZ Name: WATED, BEATRIZ Name:

1420 BRICKELL BAY DRIVE, NO. 1503 1420 BRICKELL BAY DRIVE, NO. 1503 Address: Address:

City-St-Zip: MIAMI, FL 33131 City-St-Zip: MIAMI, FL 33131 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELIAS WATED **DPT** 02/29/2008