2007 FOR PROFIT CORPORATION

FILED **ANNUAL REPORT** Mar 01, 2007 08:00 A **Secretary of State** DOCUMENT # V33694 1. Entity Name DANDY BEAR & CO., INC. Mailing Address Principal Place of Business 13700 SW 84TH STREET 13700 SW 84TH STREET MIAMI, FL 33183 MIAMI, FL 33183 02172007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0330583 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SAUMA, JORGE DO NOT WRITE 13700 S.W. 84 STREET MIAMI, FL 33183 IN THIS SPACE 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution Added to Fees After May 1, 2007 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE SAUMA, JORGE NAME 3201 S.W. 130 AVENUE STREET ADDRESS U00000651790 03/09/07-80020-018 150.00 CITY - ST - ZIP MIAM!, FL 33165 TITLE GARRIDO, CARLOS NAME STREET ADDRESS 1845 S.W. 125TH COURT CITY-ST-ZIP MIAMI, FL 33175 ESPINOSA, RENE J NAME 16255 SW 216ST STREET ADDRESS DO NOT WRITE CITY-ST-ZIP MIAMI, FL 33170 IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. Thereby certify that the information supplied with this filling 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 officer switch all other like empowered.

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR