2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2007 8:00 am
Secretary of State
04-26-2007 90183 034 ***150.00

DOCUMENT # P94000012166

1. Entity Name
CARAT 7, INC.

Principal Place of Business	Mailing Address
1001 NORTH FEDREAL HWY STE 309 HALLANDALE, FL 33009 US	1001 NORTH FEDREAL HWY STE 309 HALLANDALE, FL 33009 US

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

04192007 Chg-P CR2E034 (12/06)

4. FEI Number 65-0473891 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
NEMETS, OLGA 16400 COLLINS AVE. #1544 NORTH MIAMI BEACH, FL 33160	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 (Olga Nemets) 04/24/07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	P ☐ Delete	TITLE	P ☒ Change ☐ Addition
NAME	NEMETS, OLGA	NAME	GROU, Serguei
STREET ADDRESS	16400 COLLINS AVE. #1544	STREET ADDRESS	16485 Collins ave. #2236
CITY-ST-ZIP	NORTH MIAMI BEACH, FL 33160	CITY-ST-ZIP	Sunny Isles Beach, FL 33160
TITLE	TSD ☐ Delete	TITLE	VST ☒ Change ☐ Addition
NAME	GROU, SERGUEI	NAME	Nemets, Olga
STREET ADDRESS	16485 COLLINS AVE. #2236	STREET ADDRESS	16400 Collins ave. #1544
CITY-ST-ZIP	NORTH MIAMI BEACH, FL 33160	CITY-ST-ZIP	Sunny Isles Beach, FL 33160
TITLE	V ☒ Delete	TITLE	☐ Change ☐ Addition
NAME	BRIGHT, GEORGE	NAME	
STREET ADDRESS	6471-2 BAY CLUB DRIVE	STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE, FL 33308	CITY-ST-ZIP	
TITLE	VM ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	YEGOROV, YURIY	NAME	
STREET ADDRESS	17555 COLLINS AVE. #1202	STREET ADDRESS	
CITY-ST-ZIP	NORTH MIAMI BEACH, FL 33160	CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

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: 04/24/07 305-333-9668
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
(Olga Nemets)