2008 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 28, 2008 08:00 AM **DOCUMENT # P03000113670 Secretary of State** 1. Entity Name 18005 SOUTH DIXIE HWY., INC. Principal Place of Business Mailing Address 18005 SOUTH DIXIE HWY. POBOX 562678 MIAMI, FL 33256 MIAMI, FL 33157 01192008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0665999 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent INSUA, MANUEL H DO NOT WRITE 20960 SW 216 ST MIAMI, FL 33170 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 (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 \$5.00 May Be - Trust Fund Contribution. 10. OFFICERS AND DIRECTORS D TITLE NAME INSUA. MANUEL H 20960 SW 216 ST 05/21/08-80059-009 150.00 STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33170 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS 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 refereiver 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 attach then twith an address, with all other life empowered. 325-245-6929 4-1-08 **SIGNATURE:**

FILED