

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 524826

FILED
Jun 22, 2007
Secretary of State

Entity Name: MARCELO M. AGUDO, P.A.

Current Principal Place of Business:

2333 PONCE DE LEON BLVD
SUITE PH 1120
CORAL GABLES, FL 331345427 US

New Principal Place of Business:

1635 S.W. 27 AVE.
MIAMI, FL 33145 US

Current Mailing Address:

2333 PONCE DE LEON BLVD
SUITE PH 1120
CORAL GABLES, FL 331345427 US

New Mailing Address:

1635 S.W.27 AVE.
MIAMI, FL 33145 US

FEI Number: 59-1736418

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AGUDO, MARCELO M.
2333 PONCE DE LEON BLVD
SUITE PH 1120
CORAL GABLES, FL 331355427 US

Name and Address of New Registered Agent:

AGUDO, MARCELO M.
1635 S.W. 27 AVE.
MIAMI, FL 33145 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:

06/22/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTS () Delete
Name: AGUDO, MARCELO M,
Address: 2333 PONCE DE LEON BLVD #PH 1120
City-St-Zip: CORAL GABLES, FL 331345427

Title: D () Delete
Name: AGUDO, MARCELO M,
Address: 2333 PONCE DE LEON BLVD #PH-1120
City-St-Zip: CORAL GABLES, FL 331345427

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTS (X) Change () Addition
Name: AGUDO, MARCELO M,
Address: 1635 S.W.27 AVE
City-St-Zip: MIAMI, FL 33145 US

Title: D (X) Change () Addition
Name: AGUDO, MARCELO M,
Address: 1635 S.W. 27 AVE.
City-St-Zip: MIAMI, FL 33145 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: MARCELO M. AGUDO

D

06/22/2007

Electronic Signature of Signing Officer or Director

Date