2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 30, 2007 08:00 All Secretary of State

DOCUI 1. Entity Nam VAN-DINI					Sec	retary of Sta
Principal Place	e of Business	Mailing Address	•	1		
935 S.W. 72 AVENUE 935 S.W. 72 AVENUE P.O. BOX 522841 MIAMI, FL 33152 MIAMI, FL 33152				 		8 (8) 8 (8) 8 (8) 8 (8) 8 (8) 1 (8) 1 (8) 1 (8) 1 (8) 1 (8) 1 (8) 1 (8) 1 (8) 1 (8) 1 (8) 1 (8)
	The state of the s		A Comment of the Comm			
_	A NOT WOITE	INITUIO ODA	<u> </u>	04072007	No Chg-P CR2	E034 (11/05)
D	O NOT WRITE	IN THIS SPA	CE.	4. FEI Number 59-182782	27	Applied For Not Applicable
	4 4 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5		.•	5. Certificate of S	tatus Desired	\$8.75 Additional Fee Required
935 SW 72 MIAMI, FL B. The above the obligati		the purpose of changing its register	ed office or registe	IN T	OT WRITH	
SIGNATURE_	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE: Register	ed Agent signature require	d when reinstating)	DAT	E
FIL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.0	9. Election Campaign Fina Trust Fund Contribution.		.00 May Be ded to Fees		
10.	. OFFICERS AND I	DIRECTORS			and and the second of the seco	
TITLE	PD VANDENEDES, MARIO A.				Bay A Bay	
STREET ADDRESS CITY-ST-ZIP	935 S.W. 72 AVE. MIAMI, FL				THE STATE OF THE S	
TITLE NAME STREET ADDRESS			•			750133 80052-005 150.00
CITY-\$1-ZIP			4			

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

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 of supplemental report is true and term you 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 altachment with an address, with all other like impowered.

SIGNATURE:

ASATURE AND TYPED OR PRINTED NAME OF BIGHING OFFICER OR DIRECTOR

4-25-/07.

786-863-0301.