

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 02, 2007 8:00 am**  
**Secretary of State**

02-02-2007 90005 030 \*\*\*158.75

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                     |                                                                                                                     |                                                                                                                                                                  |                                                                                                                                                                     |                                                |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|
| <b>DOCUMENT # 610610</b><br>1. Entity Name<br><b>BERNUTH AGENCIES, INC.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                     |                                                                                                                     |                                                                                                                                                                  |                                                                                    |                                                |
| Principal Place of Business<br><b>3201 NW 24TH ST RD<br/>MIAMI, FL 33142 US</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                     |                                                                                                                     | Mailing Address<br><b>3201 NW 24TH ST RD<br/>MIAMI, FL 33142 US</b>                                                                                              |                                                                                                                                                                     |                                                |
| 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                                                                                                                                                          | 4. FEI Number<br><b>59-1989411</b>                                                                                                                                  |                                                |
| 5. Certificate of Status Desired <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                     |                                                                                                                     |                                                                                                                                                                  | \$8.75 Additional Fee Required                                                                                                                                      |                                                |
| 6. Name and Address of Current Registered Agent<br><br><b>MONOCANDILOS, JORDAN<br/>3201 N.W. 24TH STREET ROAD<br/>MIAMI, FL 33142</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                     |                                                                                                                     | 7. Name and Address of New Registered Agent<br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City <span style="float: right;">FL</span> 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.<br><br>SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____                                                                                                                                                                                                                                                                                                                 |                                                                                                     |                                                                                                                     |                                                                                                                                                                  |                                                                                                                                                                     |                                                |
| <b>FILE NOW!!! FEE IS \$150.00<br/>After May 1, 2007 Fee will be \$550.00</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                     | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees |                                                                                                                                                                  |                                                                                                                                                                     |                                                |
| 10. OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                     |                                                                                                                     | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11                                                                                                            |                                                                                                                                                                     |                                                |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | PD<br>MONOCANDILOS, JORDAN<br>3201 N.W. 24TH ST. RD.<br>MIAMI FL, <input type="checkbox"/> Delete   |                                                                                                                     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                   | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                   |                                                |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | VD<br>MONOCANDILOS, THEODORA<br>3201 N.W. 24TH ST. RD.<br>MIAMI FL, <input type="checkbox"/> Delete |                                                                                                                     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                   | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                   |                                                |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | T<br>CHABO, JORGE<br>3201 N.W. 24TH ST. RD<br>MIAMI, FL 33142 <input type="checkbox"/> Delete       |                                                                                                                     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                   | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                   |                                                |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | V<br>MONOCANDILOS, NICOLAS<br>3201 NW 24TH ST RD<br>MIAMI, FL 33142 <input type="checkbox"/> Delete |                                                                                                                     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                   | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                   |                                                |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/> Delete                                                                     |                                                                                                                     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                   | VICE PRESIDENT<br>EVANGELIA (LINA) MONOCANDILOS<br>3201 NW 24 ST RD<br>MIAMI, FL 33142 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |                                                |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/> Delete                                                                     |                                                                                                                     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                   | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                   |                                                |
| 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: <u>JORDAN MONOCANDILOS</u><br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                     |                                                                                                                     | 01/11/07<br><small>Date</small>                                                                                                                                  |                                                                                                                                                                     | 305-633-7711<br><small>Daytime Phone #</small> |