## 2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

**FILED** Mar 10, 2008 08:00 AM Secretary of State

DOCUMENT # 695148  1. Entity Name VERAMAR INC.			Secretary of Sta			
Principal Place of Business 7500 NW 8TH ST	Mailing Address 7500 NW 8TH ST	1 w-				
MIAMI, FL 33126	MIAMI, FL 33126					
DO NOT W	DITE IN THIS SE		03042008 No C	hg-P CR2	RE034 (11/05)	
DO NOT WRITE IN THIS S		ACE	4. FEI Number 59-2435816		Applied For Not Applicable	
			5. Certificate of Status I	Desired	\$8.75 Additional Fee Required	
6. Name and Address	of Current Registered Agent					
VERA, JOSE D. 2100 SW 135TH AVE MIAMI, FL 33175			DO NOT WRITE IN THIS SPACE			
8. The above named entity submits this the obligations of registered agent.		egistered office or registe	red agent, or both, in the S	itate of Florida. 1 a	am familiar with, and accept	
Signature, typed or printed name of i	registered agent and title if applicable. (NOTE F	Registered Agent signature require	d when rainstating)	DA	TE.	
THE NORTH FEE IS 64	9. Election Campaign	n Financing \$5	5.00 May Be			

Added to Fees' Trust Fund Contribution. "After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. **PVST** TITLE NAME VERA, MARTHA 2100 SW 135TH AVE STREET ADDRESS CITY-ST-ZIP MIAMI, FL TITLE 000000853658 03/26/08-80078-006 150.00 NAME VERA, MARTHA 2100 SW 135TH AVE STREET ADDRESS CITY - ST- ZIP MIAMI, FL TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITI F NAME STREET ADDRESS CITY-ST-ZIP TITLE .48 .1 NAME

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:

STREET ADDRESS .CITY-ST-ZIP

> Martha Vera TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(305) 264-6736

Daytime Phone #