2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT DOCUMENT #702126** 1. Entity Name



FILED

Jan 31, 2007 8:00 am Secretary of State

01-31-2007 90043 031 ****70.00

FLORIDA	, INC.	F PLANTATION,						
Principal Place LAUDERDALE 1101 S.W. 49 PLANTATION,	INC 9th ave.	Mailing Address LAUDERDALE INC 1101 S.W. 49TH AVE. PLANTATION, FL 333			110001100110110110	CRAL HARD KIRKE ANK DI	BIK BI BIK BIR	(
2. Principal P	ace of Business - No P.O. Box #	3. Mailing Address	<u> </u>					
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			01192007 _{Ch}	g-NP (CR2E037 (12/06)	
City & State	9	City & State		·	4. FEI Number 59-100573	1	⊢	pplied For lot Applicable
Zip	Country	Zíp	Country		5. Certificate of Sta	atus Desired	\$8.75 Ad Fee Require	
	6Name and Address of Current I	Registered Agent			7. Name and Add	ress of New Reg	istered Agent	
DEL PINO	JORGE		Name					
1101 SW 4			Street A	Address (P.O. Box Number is N	Not Acceptable)		
LANTAN	ON, 12 33317							
			City				FL Zip Cod	Je
	named entity submits this statement foi ions of registered agent.	r the purpose of changing i	ts registered office of	r register	red agent, or both, in	the State of Florid	da. I am familiar with	, and accept
SIGNATURE .	Signature, typed or printed name of registered agent	and little if applicable. (NO	DTE: Registered Agent signs	ture required	d when reinstating)		DATE	
SIGNATURE .	Signature, typed or printed name of registered agent. Filling Fee is \$61.25 Due by May 1, 2007	9. Election C	DTE: Registered Agent signs ampaign Financing d Contribution.	ture required	d when reinstating) \$5.00 May Be Added to Fees		DATE Ke check payable a Department of S	
	Filing Fee is \$61.25 Due by May 1, 2007	9. Election C Trust Func	ampaign Financing		\$5.00 May Be	Florida	ce check payable a Department of S	State
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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 617, 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: