2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**



FILED Jan 19, 2007 8:00 am Secretary of State

01-19-2007 90021 004 ****70.00

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Sulfa, Apt. P. etc. City & State A FEI Number 23-7441299 A Applied For New Applicable Recorded Rec	3665 N.E. 167TH STREET 36			8665 N.E. 167TH STREET						50(10052	3
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Zip Country Zip Country S. Certificate of Status Desired Agent Number is Not Acceptable) Name and Address of New Registered Agent	Suite, Apt.	#, etc.	Suite, Apt. #, etc.				01092007	Chg-NP	CR2E0	37 (12/06)		
Zip Country Zip Country S. Certificate of Slatus Desired S. S. Addisonal Peo Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent AMMIRATI, MAGDALENA 385 N.E. 167TH STREET SOOS NORTH MIAMI BEACH, FL 33160 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature New York Agent Ag	City & State	9	City & State							1-1-		
AMMIRATI, MACDALENA Sitest Address (P.O. Box Number is Not Acceptable) Sitest Address (P.O. Box Number is Not Acceptable) Sitest Address (P.O. Box Number is Not Acceptable) City	Zip	Country	Zip Cou			intry		5. Certificate	of Status Desired		\$8.75 Add	litional
AMMIRATI, MAGDALENA 386S NE. 167TH STREET \$506 NORTH MIAMI BEACH, FL 33160 E. 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. SIGNATURE Signature, typed or prised name of registered signate. (NOTE finguener Ayers signature reduces when maintainty) DATE		6. Name and Address of Curren	t Registered	i Agent		[7. Name and	Address of New	Registered		
SIGNATURE E. The above named entity submits this statement for the purpose of changing its registered affect or registered agent, or both, in the State of Florida, I am familiar with, and accept the obligations of registered agent. SIGNATURE District Distri						Name						
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B. The above named critity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Signature Signa	NORTH MIAMI BEACH, PL 33160					City Zip Code						
SIGNATURE Signature Signa											<u>- </u>	
Pilling Fee is \$61.25 Pilling Fee is \$65.00 Pill			for the purpo	se of changing its	registere	ed office or	register	ed agent, or bot	n, an ine State of F	-ioriga. Iam	Tamiliai Wilin,	ano accept
Filing Fee is \$81.25 Due by May 1, 2007 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE AMMIRATI, MAGDALENA 3865 NE 167 ST \$4506 NORTH MIAMI BEACH, FL 33160 TITLE STREET ADDRESS CITY-ST-2P TITLE VARGAS, JORGE E 3865 NE 167 ST \$403 NORTH MIAMI BEACH, FL 33160 TITLE NAME STREET ADDRESS STREET	SIGNATURE .	Stgneture, typed or printed name of registered age	rit and title if appli	icable. (NOTE	: Registere	d Agent signatu	re required	when reinstating)		DATE		····
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SIGNATURE:

TYPED OR PROTTED HAME OF STORING OFFICER OR DIRECTOR