2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT #841942

1. Entity Name
YATAY DEVELOPMENT, INC.



FILED Jan 10, 2008 08:00 AN Secretary of State

Principal Place of Business

881 OCEAN DRIVE APT. 19F KEY BISCAYNE, FL 33149 Mailing Address

881 OCEAN DRIVE APT. 19F KEY BISCAYNE, FL 33149



DO NOT WRITE IN THIS SPACE

01072008 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For NOT APPLICABLE Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ARAZOZA, CARLOS CPA 2100 SALZEDO STREET STE 300 CORAL GABLES, FL 33134 DO NOT WRITE
IN THIS SPACE

CORAL G	ABLES, FL 33134			I II SPACE
8. The above the obligat	e named entity submits this statement for the pations of registered agent.	ourpose of changing its register	ed office or registered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title i	f applicable. (NOTE: Registere	d Agent signature required when reinstating)	DATE
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Finar Trust Fund Contribution.	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS	Karangan dan dan Kabupatèn dan	The state of the s
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ANZOLA, CESAR H. RES. EL RISCO. URB. LAS ESMERAI CARACAS, VE 1081	DAS		J00000778660
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD ANZOLA, IDA D. RES. EL RISCO. URB. LAS ESMERALDAS CARACAS, VE 1081			· 01/11/08-80006-011 158.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP		,	DO	NOT WRITE
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12. I hereby certify that the information supplied with this filling 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:

NAME STREET ADDRESS

SUNATURE AND TYPED OF PRINTED WAME OF SIGNING OFFICE OF PRINTED OF PRINTED BY THE PRINTED BY THE