2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 08, 2007
Secretary of State

DOCUMENT# F04000005761

Entity Name: NEXT STEP MARKETING AND SPECIAL EVENTS, INC.

Current Principal Place of Business:

PO BOX 362114
SAN JUAN, PR 009362114 US

New Principal Place of Business:

RD 842 KM 1.9
SAN JUAN, PR 00927 US

Current Mailing Address:

3530 MYSTIC POINTE DR.
#215
AVENTURA, FL 33180 US

New Mailing Address:

FEI Number: 66-0522455 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MENDEZ, MARIFE
3530 MYSTIC POINTE DR.
#215
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: MENDEZ, MARIFE
Address: 3530 MYSTIC POINTE DR. #215
City-St-Zip: AVENTURA, FL 33180 US

Title: VCVP ( ) Delete
Name: MENDEZ, FELIX
Address: PO BOX 362114
City-St-Zip: SAN JUAN, PR 00936 US

Title: S ( ) Delete
Name: GONZALEZ, ANTONIA
Address: PO BOX 362114
City-St-Zip: SAN JUAN, PR 00936 US

Title: T ( ) Delete
Name: MENDEZ, FELIX
Address: PO BOX 362114
City-St-Zip: SAN JUAN, PR 00936 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARIFE MENDEZ P 04/08/2007

Electronic Signature of Signing Officer or Director — Date