

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000003368

FILED
Mar 19, 2008
Secretary of State

Entity Name: 23.50 DEGREES CORPORATION

Current Principal Place of Business:

5524 NW 114 AVE., #203
DORAL, FL 33178

New Principal Place of Business:

9726 NW 51ST TER
DORAL, FL 33178

Current Mailing Address:

5524 NW 114 AVE., #203
DORAL, FL 33178

New Mailing Address:

9726 NW 51ST TER
DORAL, FL 33178

FEI Number: 20-8887341

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RECIO, EDWARD
2437 NW 97TH AVE.
DORAL, FL 33172 US

Name and Address of New Registered Agent:

RECIO, EDWARD
9726 NW 51ST TER
DORAL, FL 33178 US

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:

03/19/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: LATACZEWSKI-RECIO, MARIA JULIA
Address: 5524 NW 114 AVE., #203
City-St-Zip: DORAL, FL 33178

Title: D () Delete
Name: LATACZEWSKI-RECIO, MARIA JULIA
Address: 5524 NW 114 AVE., #203
City-St-Zip: DORAL, FL 33178

Title: DS () Delete
Name: LATACZEWSKI, ANTONIO
Address: LOCAL 1 PB RES. CAROLINA, CALLE ALTOS DEL
City-St-Zip: EL PINAR, CARACAS VENEZUELA,

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P, D (X) Change () Addition
Name: LATACZEWSKI, ALEJANDRO
Address: LOCAL 1 PB RES. CAROLINA, CALLE ALTOS DEL
City-St-Zip: EL PINAR, CARACAS VENEZUELA, VE 00000

Title: D,S (X) Change () Addition
Name: RECIO, EDWARD
Address: 9726 NW 51ST TER
City-St-Zip: DORAL, FL 33178

Title: D (X) Change () Addition
Name: LATACZEWSKI, ANTONIO
Address: LOCAL 1 PB RES. CAROLINA, CALLE ALTOS DEL
City-St-Zip: EL PINAR, CARACAS VENEZUELA, VE 00000

Title: NA () Change (X) Addition
Name: NA, NA
Address: NA
City-St-Zip: NA, NA 00000

Title: NA () Change (X) Addition
Name: NA, NA
Address: NA
City-St-Zip: NA, NA 00000

Title: NA () Change (X) Addition
Name: NA, NA
Address: NA
City-St-Zip: NA, NA 00000

I hereby certify that the information supplied with this filing does not qualify 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: EDWARD RECIO

D

03/19/2008

Electronic Signature of Signing Officer or Director

Date