2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F71564

City-St-Zip:

FILED Apr 22, 2007 Secretary of State

DOCON	/IEIN # F / 1004		Secretary of State	
Entity Nai	me: 1120 CHARTER CORP.			
Current Principal Place of Business:		New Principa	New Principal Place of Business:	
600 NE 36	ILLAVICENCIO MEDINA ITH ST., APT. 1120 331373938			
Current Mailing Address:		New Mailing	New Mailing Address:	
600 NE 36	ILLAVICENCIO MEDINA ITH ST., APT. 1120 331373938			
FEI Number:	: FEI Number Applied For ()	FEI Number Not Applicat	ble (X) Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:			ddress of New Registered Agent:	
600 NE 36 APT #1120				
	e named entity submits this statement for the e of Florida.	e purpose of changing its r	registered office or registered agent, or both,	
SIGNATU	RE:			
	Electronic Signature of Registered	Agent	Date	
Election Car	mpaign Financing Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:		ADDITIONS/	CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () Delete VILLAVICENCIO MEDINA, , MAX 600 NE 36TH ST, #1120 MIAMI, FL	Address: 60	(X) Change () Addition ILLAVICENCIO MEDINA, , MAX 00 NE 36TH ST, #1120 IIAMI, FL 33137	
T:41	() Delete	Tido. W	D () Channa (Y) Addition	

() Change (X) Addition Title: () Delete Title: FERNANDEZ DE ANA DEL, CARMEN Name: Name: Address: Address: 600 NE 36 TH ST. # 1120 MIAMI, FL 33137 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change (X) Addition Name: Name: VILLAVICENCIO OSCAR, EDMUNDO 600 NE 36TH ST #1120 Address: Address:

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.

City-St-Zip:

MIAMI, FL 33137

SIGNATURE: MAX H. VILLAVICENCIO P 04/22/2007