2007 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: __

FILED Apr 23, 2007 08:00 AM Secretary of State

Daytime Phone #

Principal Place of Business
2337 NW 5TH AVE MIAMI, FL 33127 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc.
2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc.
Suite, Apt. #, etc. Suite, Apt. #, etc. O4192007 Chg-P CR2E034 (12/06) City & State City & State City & State Country Zip Country Zip Country 5, Certificate of Status Desired Fea Requited 6, Name and Address of Current Registered Agent Name INGELMO, CRISTOBAL 2337 NW 5TH AVE MIAMI, FL 33127 City FL Zip Code 8, 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 acceptable of the obligations of registered agent. SIGNATURE Signature, hyed or printed name of registered agent and whe ill applicable NOTE: Registered Agent signature required when relinsating) PATE PILE NOWIN: FEE IS \$150.00 After May 1, 2007 Fee with be \$550.00 PATE TILE OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. Inite PD Obeldite TitE O4192007 Chg-P CR2E034 (12/06) Applied For 59-2190750 Status Desired Status Desired Status Desired Status Desired The Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) The Street Address (P.O. Box Number is Not Acceptable) DATE Address (P.O. Box Number is Not Acceptable) Trust Fund Contribution. Address (P.O. Box Number is Not Acceptable) DATE Address (P.O. Box Number is Not Acceptable) Trust Fund Contribution. Address (P.O. Box Number is Not Acceptable) DATE Address (P.O. Box Number is Not Acceptable) Trust Fund Contribution. Address (P.O. Box Number is Not Acceptable) DATE Address (P.O. Box Number is Not Acceptable) Trust Fund Contribution. Address of New Registered Agent with a status of Status Desired Status Desired Status Desired The Address of New Registered Agent with a status of Status Desired Status Desired The Address of New Registered Agent with a status of Status Desired Status Desired The Address of New Registered Agent with a status of Status Desired Status Desired The Address of New Registered Agent with a status of Status Desired Address of New Regi
City & State Country Count
Zip Country Zip Country 59-2190750 Not Applica St. Certificate of Status Desired \$8.75 Additional Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name INGELMO, CRISTOBAL 2337 NW 5TH AVE Street Address (P.O. Box Number is Not Acceptable) 6. 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 acceptable of the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and lete if applicable. (NOTE: Registered Agent signature required when rainstaling) DATE FILE NOWISH FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS Add. Add
Zip Country
6. Name and Address of Current Registered Agent Name
Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code 6. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Porida. I am familiar with, and acceptable obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and letter if applicable. PILE NOWILL FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 P. Election Campaign Financing Trust Fund Contribution. 9. Election Campaign Financing Trust Fund Contribution. Added to Fees 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 1816 PD Delete Title City FL Zip Code Street Address (P.O. Box Number is Not Acceptable)
Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code 8. 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 acceptable of the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and bitle if applicable. (NOTE: Registered Agent signature required when reinstaling) DATE FILE NOWIII FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. 4. Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
8. 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 acceptable obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and bitle if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOWILL FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. Delete TILE Delete TILE Delete Add.
the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent alignature required when reinstalling) PILE NOWIN: FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. TITLE PD Delete TITLE Additional Pile In Indian
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent alignature required when reinstating) FILE NOWIST FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 INTLE PD Delete TITLE Added to Fees
FILE NOWILL FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11TLE PD Delete TITLE Grange Add.
TITLE PD Delete TITLE Change Add
- Paris
MME 11/05ELINO, ORIGIODAL 1/07/13/4
STREET ADDRESS 2337 NW 5TH AVE STREET ADDRESS 05/04/07-80021-024 15
CITY-ST-ZIP MIAMI, FL 33127 CITY-ST-ZIP
TITLE SD Delete TITLE Change Add
STREET ADDRESS 2337 NW 5TH AVE STREET ADDRESS
CITY-S1-ZIP MIAMI, FL 33127 CITY-S1-ZIP
TITLE Opelois ITTLE Change Add
STREET ADDRESS STREET ADDRESS
CITY-S1-ZIP CITY-S1-ZIP
TITLE Delete TITLE Change Add
STREET ADDRESS STREET ADDRESS
CITY-ST-ZIP CITY-ST-ZIP
IIILE Delete TIILE Change Add
NAME NAME STREET ADDRESS STREET ADDRESS
NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP
STREET ADDRESS STREET ADDRESS
STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP