2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2008
Secretary of State

DOCUMENT# H88001

Entity Name: PRADO MANAGEMENT, INC.

Current Principal Place of Business:

3820 NORTHDALE BLVD
STE 107A
TAMPA, FL 33624

New Principal Place of Business:

Current Mailing Address:

3820 NORTHDALE BLVD
STE 107A
TAMPA, FL 33624

New Mailing Address:

FEI Number: 59-2899959 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MILLS, FREDERICK J.
C/O MORRISON & MILLS, P.A.
1200 W.PLATT ST, STE 100
TAMPA, FL 33606 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:	SD	( ) Delete
Name:	HERRERA, DAMARIK	
Address:	15204 ALEXIS DRIVE	
City-St-Zip:	TAMPA, FL 33624	
Title:	PD	( ) Delete
Name:	PRADO, JUAN C	
Address:	6712 ROSE LEA CR.	
City-St-Zip:	LUTZ, FL 33558	
Title:	VPD	( ) Delete
Name:	PRADO, JENIFER Z	
Address:	6712 ROSE LEA CR.	
City-St-Zip:	LUTZ, FL 33558	
Title:	VPD	( ) Delete
Name:	DEL CUETO, JUAN	
Address:	15129 SPRINGVIEW ST	
City-St-Zip:	TAMPA, FL 33624	
Title:	TD	( ) Delete
Name:	ROMER, ANTHONY J III	
Address:	17320 LINDA VISTA CIRCLE	
City-St-Zip:	LUTZ, FL 33548	

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

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: A.J. ROMER, III TD 04/17/2008

Electronic Signature of Signing Officer or Director — Date