## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# K24974

FILED May 17, 2007 Secretary of State

Entity Name: PROGRESS REUNITED CORPORATION

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
5805 BLUE LAGOON 300 MIAMI, FL 33126	I DR.			
Current Mailing Add	dress:	New Mailing Address	::	
5805 BLUE LAGOON 300 MIAMI, FL 33126	IDR			
FEI Number: 65-0183558	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:		Name and Address of	Name and Address of New Registered Agent:	
BASILIO, JR., BASILI 520 BRICKELL KEY [ MIAMI, FL 33131				
The above named en in the State of Florida		purpose of changing its registered	d office or registered agent, or both,	
in the State of Florida SIGNATURE:	. 1		d office or registered agent, or both,	
in the State of Florida SIGNATURE:			d office or registered agent, or both,  Date	
in the State of Florida SIGNATURE: Elec In accordance with s. 60	etronic Signature of Registered Ag 7.193(2)(b), F.S., the corporation did n	gent		
in the State of Florida SIGNATURE: Elec In accordance with s. 60 Election Campaign Finar	etronic Signature of Registered Ag 7.193(2)(b), F.S., the corporation did n noing Trust Fund Contribution ().	gent not receive the prior notice.		
in the State of Florida SIGNATURE:  Election Campaign Finar OFFICERS AND DIR Title: DPT Name: BASILIO, J	etronic Signature of Registered Ag 7.193(2)(b), F.S., the corporation did noting Trust Fund Contribution ( ). RECTORS:	gent not receive the prior notice. ADDITIONS/CHANGE	Date	
in the State of Florida  SIGNATURE:  Election accordance with s. 60  Election Campaign Finar  OFFICERS AND DIR  Title:  DPT  Name:  BASILIO, J  Address:  520 BRICK  City-St-Zip:  MIAMI, FL  Title:  S  Name:  BASILIO, J	etronic Signature of Registered Ag 7.193(2)(b), F.S., the corporation did noting Trust Fund Contribution ( ). RECTORS:  ( ) Delete  J. A.,  (ELL KEY DR #305	gent not receive the prior notice.  ADDITIONS/CHANGE  Title: Name: Address: City-St-Zip:	Date ES TO OFFICERS AND DIRECTORS	

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: J.A. BASILIO DPT 05/17/2007