## 2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

CITY-ST-ZIP

of the corporation or the changed, or on an attack

SIGNATURE:

## Apr 04, 2008 08:00 All Secretary of State DOCUMENT # K98966 400 ÁLHAMBRA CIRCLE CORPORATION Principal Place of Business Mailing Address 396 ALHAMBRA CIRCLE 396 ALHAMBRA CIRCLE 100 CORAL GABLES, FL 33134 CORAL GABLES, FL 33134 01182008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0198558 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Name and Address of Current Registered Agent MURAI, WALD, BIONDO, & MORENO, PA 2 ALHAMBRA PLAZA PENTHOUSE 1B MIAMI, FL 33134 IN THIS SPACE 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 Fiorida. Lam familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) HUUUUUNAADA44 2 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME ISAIAS, ROBERTO STREET ADDRESS 396 ALHAMBRA CIRCLE, STE 100 CITY-ST-ZIP MIAMI, FL 33134 TITLE ISAIAS, WILLIAM NAME STREET ADDRESS 396 ALHAMBRA CIRCLE, STE, 100 CITY-ST-ZIP MIAMI, FL 33134 VDS TITLE ISAIAS, ESTEFANO NAME STREET ADDRESS 396 ALHAMBRA CIRCLE, STE. 100 CITY - ST- ZIP MIAMI, FL 33134 THIS SPACE CARMEN MORLA, MARIA DEL NAME STREET ADDRESS 396 ALHAMBRA CIRCLE, STE, 100 CITY-ST-ZIP MIAMI, FL 33134 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and docurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the report or trustee employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

OF BIGNING OFFICER OR DIRECTOR

03.28.08

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**FILED**