## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Jan 24, 2008 08:00 AN Secretary of State 01162008 No Chg-P CR2E034 (11/05) 4. FEI Number 65-0208859 5. Certificate of Status Desired \$8.75 Additional Fee Required DO NOT WRITE IN THIS SPACE

711110712 1121 0111								
DOCUMENT # L81685  1. Entity Name FRONSA CORP.								
Principal Place of Business	Mailing Address							
4250 INGRAHAM HIGHWAY COCONUT GROVE, FL 33133-6718	4250 INGRAHAM HIGHWAY COCONUT GROVE, FL 33133-6718							

6. Name and Address of Current Registered Agent

COCONU	T GROVE, FL 33133-6718			· · · · · · · · · · · · · · · · · · ·	THIS SPAC	<b>3E</b>	· · · · · · · · · · · · · · · · · · ·
	named entity submits this statement for the plans of registered agent	urpose of changing its registere	d office or r			I am familiar with, and acc	cept
SIGNATORIE	Signature, typed or printed name of registered agent and title	f applicable (NOTE Registered	Agent signature	required when reinstating)		PATE	
FIL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Finance     Trust Fund Contribution	cing	\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	TORS	13 July 1			THE PROPERTY OF THE PROPERTY O	1 77%
TITLE NAME	P BLANCO, LIANA M		大學 美				
STREET ADDRESS CITY-ST-ZIP	4250 INGRAHAM HIGHWAY COCONUT GROVE, FL 331336718						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BLANCO, EMMA R 4250 INGRAHAM HIGHWAY COCONUT GROVE, FL 331336718				01/25/08-800	\$67 15-013(150.00	
TITLE NAME STREET ADDRESS CITY-SI-ZIP				DO	NOT WRI	TE	
TITLE NAME STREET AODRESS CITY-ST-ZIP	-			in:	THIS SPA	<b>JE</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS							海

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 accurate 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

BLANCO, LIANA M

4250 INGRAHAM HIGHWAY

Suana Planeo
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFIC

21/17/08

Daytime Phone #