2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Apr 23, 2007 08:00 A Secretary of State DOCUMENT # M15198 1. Enlity Namo INTERDATA GROUP CORPORATION Principal Place of Business Mailing Address C/O JORGE L. PEREIRA 1005 SW 87TH AVE C/O JORGE L. PEREIRA 1005 SW 87TH AVE MIAMI FL 33174 MIAMI FL 33174 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) 4. FEI Number City & State City & State Applied For 59-2556942 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PEREIRA, JORGE L Street Address (P.O. Box Number is Not Acceptable) 1005 SW 87TH AVE MIAMI FL 33174 City Zip Codo 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 accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and life it applicable. (NOTE, Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 17 18 1 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete MILE ☐ Change Addition PEREIRA, JORGE L. NAME NAME 000000720594 05/01/07-80111-010 150.00 1005 SW 87TH AVE STREET ADDRESS STREET ADDRESS **MIAMI FL 33174** CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete IIILE 📋 Change AddItion PERIERA, MARIA I NAME NAME 1005 S.W. 87TH AVE, STREET ADORESS STREET ADDRESS MIAMI FL 33174 CITY-ST-ZIP CITY-S1-ZIP TITLE Delete THILE ☐ Change Addition PERIERA, JORGE L JR. NAME NAME 1005 S.W. 87TH AVE. STREET ADDRESS STREET ADDRESS **MIAMI FL 33174** CITY-ST-7IP CITY-ST-ZIP DVP TITLE ☐ Delete TITLE ☐ Change ☐ Addition PERIERA, EDUARDO NAMI NAME 1005 S.W. 87TH AVE. STREET ADDRESS STREET ADDRESS **MIAMI FL 33174** CITY-ST-7IP CITY-S1-ZIP THILE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CHY-SI-7IP CITY - ST - ZIP THIE Delete HTLE Change Addition NAME NAME STRUET ADDRESS STREET ADDRESS CHY-SI-7IP CITY-ST-7IP

I hereby cortify that the information supplied with this filling doos not qualify for the exemptions contained in Section 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 eath; 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

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4.17.07

305-346-05 75

FILED