2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # M20594

D' PRINTING HOUSE CORP.



FILED Apr 23, 2008 08:00 AN Secretary of State

Principal Place of Business

% JORGE M. FORTE 9901 N.W. 80TH AVENUE, #3N HIALEAH GARDENS, FL 33016

Mailing Address

% JORGE M. FORTE 9901 N.W. 80TH AVENUE, #3N HIALEAH GARDENS, FL 33016



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

01142008 No Chg-P CR2E034 (11/05) Applied For 4. FEI Number Not Applicable 59-2582813

\$8.75 Additional 5. Certificate of Status Desired Fee Required

FORTE, JORGE M.

DO NOT WRITE

9901 HWY 80TH AVE BAY #3N HIALEAH GARDENS, FL 33016			IN THIS SPACE			
	named entity submits this statement for the plions of registered agent.	urpose of changing its registered	d office or ri	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept	
SIGNATURE				Agent signature required when reinstating) DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.		\$5.00 May Be Added to Fees	U00000915557 OS/09/08-80020-019 150.00	
IILE NAME STREET ADDRESS CITY-ST-ZIP IITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FORTE, JORGE M. 9901 NW 80 AVE BAY 3N HIALEAH GARDENS, FL 33016					
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS				DO NOT WRITE IN THIS SPACE		
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE						

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:

STREET ADDRESS CITY-ST-ZIP