2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED DOCUMENT # M47231 Jan 18, 2007 08:00 AM **Secretary of State** WATLING INVESTMENTS INC. Principal Place of Business Mailing Address 3350 S.W. 129 AVENUE 3350 S.W. 129 AVENUE MIAMI, FL 33175 US MIAMI, FL 33175 US 01162007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0012664 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ANLLO, CARLOS DO NOT WRITE 3350 SW 129 AVE MIAMI, FL 33175 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 Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE_ Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) DATE 000000591636 01/19/07-80031-005 150.00 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS TITLE ANLLO, CARLOS NAME 3350 SW 129 AVE STREET ADDRESS CITY - ST - ZIP MIAMI, FL TITLE STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-SI-ZIP

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 address, with all other like empowered.

Carlos Anllo SIGNATURE(TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TITLE NAME STREET ADDRESS CITY-SI-ZIP

1/16/2007

(305)812-0052.

Daytime Phone #