2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M48115

City-St-Zip:

MIAMI, FL

Entity Name: LA REGIONAL CORPORATION

FILED Feb 29, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	. 48TH STREE	Т			
UNIT 102 MIAMI, FL	33155 US				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
9192 CORAL WAY SUITE 201 MIAMI, FL 33165 US		7342 S.W. 48TH STREET UNIT 102 MIAMI, FL 33155 US			
ŕ	: 59-2803993	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
327 EAST SIXTO LA	.EJANDRO 49TH STREET W OFFICE FL 33013 US				
	e named entity s e of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
SIGNATUI					
	Electron	ic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financing	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	PD () SIXTO, CARME 7342 SW 48TH MIAMI, FL	·	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V () SIXTO, ANDRE 7342 SW 48TH MIAMI, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () SIXTO, EMILIO 7342 SW 48TH MIAMI, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	TD () SIXTO, FELIPE 7342 SW 48TH		Title: Name: Address:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: EMILIO SIXTO S 02/29/2008